

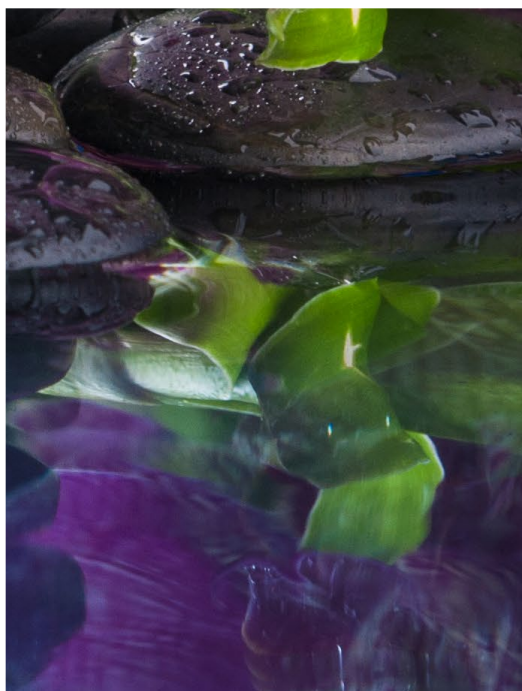


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ENERGY, FREQUENCY, AND VIBRATIONAL HEALING *summit*

INTRODUCTORY EXPERT TALKS

4 expert talk transcripts from Christine Schaffner, ND and Dr. Dietrich Klinghardt



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From the entire Body Electric team, thank you for downloading these transcripts -- we hope you learn a lot from them!



Biohacking the Body Electric

Dave Asprey

Christine: Hi, everyone. I am here with Dave Asprey, the father of biohacking and founder of Bulletproof. So welcome, Dave. I'm so excited to interview you today. And I really appreciate you taking the time to do this Summit interview.

Dave: Christine, it's my pleasure.

Christine: Thank you. Well, I really enjoyed all of the work that you've really pioneered. And we're all grateful in the Lyme and the mold community for you making this information more and more mainstream. And so, I know a lot of my patients have benefited from learning through your podcast. And all the great information you put out there. And the goal for the Summit is really to just share with people that there's this whole other realm of how we can treat chronic illness and just even maintain and prevent illness using tools that employ biophysics.

And so, I know that can be a scary word for people. And we want to really make this accessible. But how did your journey begin and what specific technology that did you really start with in using these tools for your health?

Dave: I had arthritis in my knees when I was 14. And I used to weigh 300 pounds. I had cog-

nitive dysfunction. Various people said, "Dave, you have fibromyalgia, chronic fatigue." Just all sorts of things, brain dysfunction. So, I went down the, "I'm just going to exercise my way out of this fatness. And I'll go on a low fat, low calorie diet." And after 18 months of that, I felt, well tired. And I was still fat. And I could max out all the machines at the gym. But it didn't work.

When my brain started going in my mid-twenties, where I just felt like I couldn't pay attention. I was dealing with really serious brain fog. You wake up feeling hung over, but you didn't drink. It was like, "What the heck is going on?" I tried all this stuff that was supposed to work. I went to the doctor who told me that, "Vitamin C would kill me." When I said, "Hey, what about Linus Pauling?" He said, "Linus who?" And I looked at the doctor and said, "Linus Pauling, two Nobel prizes, only guy like that. He took 90 grams of Vitamin C a day. And the fact that you don't know that, tells me you're incompetent. You're fired." And I walked out of the room. And I was all pissed off. I didn't see another doctor for four years.

And I came back to a doctor. I found a functional medicine practitioner. This is before we had a name for functional medicine. Back



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then it was ortho molecular. And or maybe an anti-aging doctor.

I said, “I have one of these eight things going on. And I’ve read four books on each one. And all the PubMed papers. I want this test from this and that and the other.” And fortunately, I did find someone like you, who really was aware of the system of human biology. But along the way, I said, “I’m going to try this stuff that’s not supposed to work.” So, number one, my brain isn’t working. I can’t pay for my medical care much less my house, my car, and my food if I don’t make my brain work.

So, I started out with stuff that might work. I ordered \$1,200 worth of smart drugs from Europe. I said, “I’m going to try those.” And on the more, kind of out there, side of things, I ordered a device after reading *The Electromagnetism in Life* by Robert Becker. I said, “Alright, I’m getting something that makes the Schumann resonance.” And this is what happens when lightning strikes. It creates a reverberating electromagnetic field between the upper atmosphere and the surface of the earth. And it’s a timing signal for the body.

My background, I’m a computer hacker. I worked for the company that held Google’s first server. And believe it or not, I’m the first person to sell anything over the Internet. Like the first e-commerce before the name e-commerce existed was a t-shirt sold out of my dorm room. And so, I’m really a hacker. I’m going, “Oh wait, everything we do in computer science requires a timing signal. Our bodies require a timing signal.” And since then, this was twenty, twenty-five years ago, I have been

playing a 7.8 hertz Schumann resonance, EMF in my house as a timing signal for my body to synchronize to.

Since then, circadian biology, a couple of Nobel prizes have been awarded for that. And in turns out, everything we do is cyclical, and cycles require timing. And timing is set predominantly by light. But every environmental thing sets timing. Light does. The time that you eat does. The temperature works and so does the electromagnetic environment. All of those combined to tell all the quadrillions of separate elements in your body, “Hey, here’s how to work together as a team. Here is how now too.”

So, one of my first things was, “Hey, let me strengthen that field that the earth is supposed to give me. That’s being scrambled by the EMF soup that we swim in every day.” By the way, did I mention that I’m a computer hacker. I like computers. I like mobile phones. I like what we are able to do. And what would have taken months of research, I can do it in ten seconds. That’s just precious stuff for the human race. I just think we can do it in a way that’s biologically beneficial instead of harmful. And one of the first things I did, was that.

Christine: So, many great points. And why don’t we just even break down this idea. We have an expert on EMF and how these frequencies such as cell phone radiation, Wi-Fi, have a detrimental effect. But we also have these positive electromagnetic fields in our bodies.

And so, can you talk a little bit about how our bodies work from an electromagnetic standpoint? And healing frequencies that you’ve experienced in your life?



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Dave: Absolutely. I like to think of water. Well, you could say if you almost drowned, “Oh my God, water is dangerous. Stay away.” And then you say, “Oh, but I’m thirsty.” So, is it possible that the dose matters? “Okay.” So, maybe having the right amount would make a difference. And then you can say, “I drank boiling water once and it really burned me. Therefore, water is dangerous even at low doses. Therefore, I won’t drink.” Obviously, that doesn’t make any sense.

So, when it comes to things like electromagnetic frequencies, “Well did you want to have the right dose and the right frequency?” Which is the equivalent of temperature for water, right? So, you’re not going to drink a glass full of steam. So, you’ve got to get it set up right. And we know for a fact that there’s an electromagnetic spectrum that starts with basically heat, a very low frequency waves and goes all the way up to x-rays. It’s a continuum. And light is in there. Heat is in there. And the fact that we see a very narrow frequency of light and go, “Oh, that’s our reality. It’s what we can see. And a little bit of what we can sense with our temperature sensors, our skin, and what-not.” There’s a whole big world out there that is biologically active.

And a lot of people don’t know about the videos of aphids, a couple of miles away from an airport. And there’s a rotating radar dish at any airport. And when the radar pulse hits where the aphids are, you see all the aphids on the leaf of a flower jump, and then jump, and then jump. I can tell you, we’re not that different from aphids genetically.

And so, we know there’s a biological effect. There is no question about it. The industry has said based on really 1950s research look, the temperature that that your body reaches, like it would in a microwave oven, is the only variable that matters. That has been disproven. But we still repeat that myth a lot.

So, I asked myself, “Is there anything else going on?” There’s a guy named, Royal Rife, who surprisingly Tesla borrowed a few technologies from, and they were contemporaries. And if you look at the research and have some of Rife’s original papers and what not, way back twenty years ago when I got into this. You realize there’s been a lot of interesting research over the years about how these things work. What Rife did is he developed a microscope that allowed him to look inside live cells at the level of an electron microscope. But he could do it just visually. And he figured out that in order to illuminate the specimen, he had to use a radio frequency. Because if he used light and he amplified light that much that he was actually amplifying light so much he couldn’t see it anymore. Light was basically too big of a wave form.

So, he noticed, “Wow, if I play the right frequency. I can blow up these viruses and these bacteria.” They would literally disintegrate while he watched. So, he came up with a list of about 10,000 different frequencies that would do different things to different parts of the body.

Now, I’m a little bit of a skeptical, Western trained, engineering guy. I’m like, “Okay, on this face, it sounds cool. It also sounds



completely wacky.” So, I did what any good engineer would do. I said, “That can’t work. Therefore, it doesn’t.” And I went on with my life. Wait, no. I didn’t do that. That would be anti-science. What I said is, “I’m going to check this out.” So, I bought a Rife machine. And this is getting out there, I had a digital frequency generator, so I could dial in any frequency I wanted. I hooked up to a giant amplifier and a big antenna made out of neon gas essentially. It looked like an anvil.

Now, maybe I’m just completely placboing myself. And I’m sleeping in tinfoil hats, I don’t really do that. But I could have been off in the deep end. But here’s what stands out to me. There was a woman in the room with me, when I was playing with this thing. And I was thinking, “Hmm, I know that she’s dealing with, basically, herpes lesions inside her sinuses.” So, that’s an unusual thing. That’s essentially a cold sore in your sinuses. Exceptionally painful. And I said, “I’m not going to saying to her.” She was just sitting there reading. I’m going to put the machine on the frequency that Rife identified for herpes. And so, I did it. I turned it on. Within a second, she drops her book, screams, grabs her sinus, and says, “Oh my God, what are you doing? Turn that thing off.” Placebo my ass. There was no placebo there because she did not know that I was doing anything to do with her.

But I am absolutely, a hundred percent certain to this day, the only way that could have happened is if “Wow, that frequency was resonating with the virus that was causing those lesions in her sinuses. And of course, that hurt.”

So, can we target specific things in the body or in nature with electromagnetic frequencies? Yes, because I have seen it and I have done it. And I know healers who do it as well. It is a known thing.

Christine: And there’s a spectrum of tools and many of my patients have experimented with Rife technology. And it’s all about the right frequency, right? So, in order to get the right therapeutic effect, you have to be targeting the right pathogen to get the symptom improvement. Did you find help within your body with Rife technology?

Dave: I didn’t get enough benefit because there’s 10,000 frequencies. There’s not enough time to run all 10,000 frequencies. And I’m not sure that I know what I have. So, I ended up getting infrared sauna and selling my Rife machine many, many years ago. But today, our ability to do signal processing and analyzing is orders of magnitude better because this whole tech industry thing that sometimes the EMF communities, you know, we moan about it. But here’s the deal, you can now scan the body to the frequencies that you need by using signal processing that would have cost tens of millions of dollars if you could have done it in the 80s. And you can do it for vanishingly small amounts of money.

So, our ability to know what frequency your body needs are much better than it has been. Which inspires me. So, I would say, I didn’t get a lot of out of it back then. I might have got something. I ended up getting probably more benefit from something else that’s energetic, but it’s ozone therapy. Where you’re putting



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electrons directly into the body. And I've done huge amounts of work with light therapy. Both as a signal for my circadian biology. And also, to directly put more electrons into the body. And I went from being tired all the time, brain fog, high risk of stroke and heart attack. These are all like lab result data things before I was 30. I'm 46 now, and my brain works better, I have more energy, I get great amounts of deep sleep and REM sleep. Even in six hours of sleep at night, I get more deep sleep than the average 20 year old gets in eight hours.

Things are working better than they have been. And I believe that that combination of light and using therapeutic EMFs has been really beneficial.

And going back, Christine, to the idea of hot water and having the right frequencies and looking at those aphids jumping around with radar. Well, if drinking water to stay hydrated is health. Then maybe some EMFs can be good, and some can be bad. And this is one of those statements that can piss off both sides of the debate. Like in the vaccine world, vaccines are either good or bad. There's no room in the middle and say some of them are effective for some people. Or some are better for this than for others. "No. They are either good or they are bad." A we are going to be on extremist ends. EMFs are the same way, right? Is the ability to call 911 on your mobile phone something that might save lives? Yes. Is that going to be more important than whatever hit you took biologically from the EMFs from the phone? It is. So, there's always a risk reward. There's always a cost in it. There's always a trade-off. And one

of the things that I do with EMFs, is I have a very powerful, EMF machine that we use it at Upgrade Labs. This is a spin out from my company Bulletproof. We've got this at the Beverly Hilton in L.A. We've got this in Santa Monica. And you sit on this chair or use these paddles, they are giant heavy duty coils. And what powers them, is the power supply from a fighter jet. The radar control system power supply. It's a solid state, big heavy duty thing in order to make enough current to turn on and off.

And funny enough, you can use magnets to induce an electrical current in cells. So, when you turn these fields on and off really rapidly in your cells, it does stuff to your cellular biology that's actually beneficial. It essentially exercises the cells. You can put energy into the cells. And I've seen hundreds of people say, "I have this chronic pain in my neck or my back. It's been there forever. And I did this for 10 minutes and it went away. And it stayed gone." It's because the cells were dormant. And they just got kind of kicked in the pants. That seems like a good use of EMF to me.

Christine: You know, reminding people that we have this electrophysiology, right? You know, we know that we even measure our heart with technologies, that measure the electromagnetic field of our heart. We know that our nervous system communicates with electromagnetic signaling. And so, the more you know about physiology, this is not random or a placebo, right? This is absolutely having a therapeutic effect. And these tools, especially if you've been stuck for a while and you're really sick and you haven't tried therapies on



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this level. We encourage you to do that because that's where more healing can happen. What's the name of your device that you just mentioned?

Dave: This is from Pulse Centers out of Atlanta. And over the years I've had a whole bunch of different pulsed electromagnetic frequency devices. Some are very subtle. And they say, "I'm going to play the frequencies for my liver. Or I'm going to play something for the brain." I tried things that you stick on your head. Even at 40 years of Zen, which is Neuroscience Institute that I started in Seattle. We have people come in for five days of intensive neurofeedback work with neuroscientists. You are there ten hours a day and we feed you the right things. We do everything we can to upgrade your brain.

One of the technologies we use there is pulsed magnets on your head in specific locations, playing specific frequencies for your brain as determined by a neuroscientist. And the reason you do that is there are studies that show it can increase neuroplasticity. We can activate parts of the brain that aren't active. So, yes, magnets affect your brain. And there's no way we can do that and see the results on EEG unless, "Oh my God, science."

Christine: Yeah, no, absolutely. And, let's talk a little bit about neurofeedback. I mean, you've talked a lot about neurofeedback. I know that's been a big part of your healing and continuing to keep your brain optimize. For the average listener where this might be a new topic. What really is neurofeedback? And who is it good for?

Dave: Neurofeedback is the idea that your brain makes an electrical signal. And that you can pick up that signal on the surface of your head. You can take that signal, run it into a computer. The computer then shows your brain what it's doing. Either you're using sound or using something on a screen. And once your brain and you can see your brain is doing, you can consciously change it. It's sort of like in the old days. Well you want to teach someone to meditate, put them in a cave for 20 years, they'll figure it out.

The thing is, you and I, Christine, we really don't have 20 years to do that. So, what if you could look at a computer or listen to a sound and it would show you when your brain was misbehaving? It turns out our brains want to behave. However, they have no nerves inside themselves. You and I can look a mirror and see whether there is something caught in our teeth. Well, the brain doesn't have a mirror to see what's in its own teeth. Since it will self-optimize, you can literally go in and say, "Oh, I have this thing I don't like. I'm going to change it." So, this is the ability to rewire yourself.

What I do at 40 years of Zen with this is a little bit different because instead of just saying, "You know, we'd like to show you how to be in a meditative state or something." We actually teach you, here's how to go into these advanced altered states that a Zen monk might achieve after 20 or 40 years. And use those to practice techniques of light to let go of old traumas and just to forgive things. So, you walk out of there and the voice in your head has shut up. And that's the extreme levels of



neurofeedback. But you can take someone having seizures and use clinical grade medical neurofeedback and treat seizures. You can treat autism. You can treat ADHD.

In fact, the reason I do neurofeedback today is that in about 1997 I said, "Alright, my brain isn't working. I'm willing to try anything. I'm going to try neurofeedback." This is way before it was a thing. I found one guy in the Bay Area who did it. I showed up at his office. And this little kid was in the lobby, maybe eight or ten. And he comes up to me and he just starts screaming.

And he just runs in a circle around me, not once, but like 30 or 40 times just screaming. And it was pretty jarring and not very fun. So, I went in and did my sessions once a week for about an hour. And probably got some awareness of what was going on in my biology that I didn't have.

But I came back after about six weeks. Same little kid, he was in the lobby. I was like, "Oh, God. I'm going to go outside and wait in my car." But instead he looks at me, he walks up. And he goes, "Hi, my name is Bobby."

And he shakes my hand. I'm like, "Oh my God, look at the change in this little kid in that period of time." Clearly, he was autistic, at least at the beginning. Since then, I have worked with autistic moms, even running non-profits. They are curing their kids of autism.

And yes, and you know this because you see the same thing. You have to address metals in the body. You have to address biology. Mitochondrial function. And there's a whole stack

of things, infections, viruses, parasites, fungus, toxic mold. Those are part of it.

But at the end of the day, even if you fix all those and the brain just doesn't know what it's looking at, you can sharpen the brain. So, neurofeedback is one of the most important and impactful tools for human progress, that I've ever come across. And you're talking to a guy who spent a million dollars upgrading my own biology. I've done everything on the planet I can find. This is on the top.

Christine: And it's probably still under-utilized even in alternative spaces. And so, any tips or caveats with a lot of the technology that's out there? I would probably say that not all neurofeedback is created equal. But anything that people should look for and make sure that they're checking if they're going to a center or get some home technology?

Dave: I am a really big fan of finding a practitioner who has done it for a while and is well certified. There are a few companies out there who will say, "Oh, anyone can be a neurofeedback practitioner. Write a check to us and we will give you a system." And there is danger with neurofeedback as well. If you have a clinical grade system, you can give yourself PTSD in two hours of training the wrong frequencies in the wrong place.

When I started this, after I did my 10 weeks in 1987, I bought my own machine And I've had two or three EEG machines float around my house ever since then. The difficulty is after a couple of years of that I realized, doing brain surgery on yourself is probably a bad idea. So, I tend to work with the top neuroscientists I can



find. So, look for a clinical practitioner in your neighborhood who has a lot of experience. And I think that's your best bet.

If you want to just to feel kind of the entry level, what's possible. There are home systems out there like the Muse, which are affordable. And for a lot of people, if you had an hour to meditate, you'll probably meditate more and faster in that hour if you use a Muse than if you don't. But there might be some states that your brain is capable of that won't be trained by the Muse.

And so, when you get into the very high level stuff, like 40 years of Zen. It's at a clinic. And you're spending five days all day, every day. And it's based on a 24 channel clinical map of what's going on in your brain. And saying, "We want to tune this up. We want to tune this down. And you've got to let go of whatever childhood trauma you have when you're in a car accident or whatever." But there's a prescribed process. So, that's the extreme.

The other one is, "Hey, I put this little headset on. And I meditated for an hour in my hotel room. And that meditation had a higher return on investment than it otherwise would have." Those are pretty broad extremes. But they all work. And they're all probably better than just sitting there and hoping.

Christine: Yeah, thank you for illustrating that. And I'm just curious, from maybe your personal feedback, have you found that that your personal experience with neurofeedback or what you've seen clinically has improved the brain's ability to detoxify or improve the glymphatic system? Anything like that? Because

obviously accessing the brain and getting the things that you shared, pathogens, metals, all these environmental toxicants out of the brain is challenging. So, do you feel like this has a piece in brain detoxification as well?

Dave: It's totally weird. But anytime someone does a transpersonal psychology work. I'm just going to say letting go of old garbage. And, this transpersonal comes from the work of Stan Groff, who figured out, "Wow, there's these patterns in human life that started even in the womb. And reverberate throughout." I've interviewed Stan on Bulletproof radio. I've done breathing with him. He pioneered a breathing technique called Holotropic Breathing. And one of the early practitioners I worked with there said, "You know, Dave, we've run some studies and when people do intense emotional release work. In other words, they let go of an old grudge they might not have even known they were holding. Their ability to dump metals goes through the roof." So, you can run a chelator agent, which is something that will bind to metals and cause the body to excrete it. You run it through someone, and their body will not let it go. And then they do a bunch of deep breathing exercises, they do neurofeedback, or they practice a structured forgiveness. And then all of a sudden, they do the same treatment and you're getting crazy amounts of lead and mercury out of the body.

What is going on there? Well, I have some theories. And these come out of my book called *Head Strong*. Which I hit the New York Times Science Bestseller list about mitochondrial biology in the brain. What I think is going on



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here is that a lot, of the feelings, the emotions, the automatic responses to the world around us, the voice in our head that tells you a story about why you feel a certain way. They aren't in your brain. They're throughout your body. It's an emergent behavior. Every cell contains hundreds to thousands of ancient bacteria that are largely calling the shots. And they're just trying to figure out what's going on right now in my little world. And then when you have this happening in quadrillions of places, millions of times a second. You get these really complex behaviors that feel and look like hate, love, and like really deep emotional responses.

So, if that network is set up to say, "The world's a bad place and everyone's out to get me. And no one likes me. And I look fat today." Whatever the heck the voice in your head says, maybe those cells just won't really be interested in letting go of toxins. Because they're just too busy protecting themselves. What if you could use any electromagnetic signal to tell them, "Hey guys, chill the heck out. Let go of that." Or what if you could train yourself with neurofeedback in order to do it?

So, my process has been for four months of my life. I've had electrodes glued to my head every day. And I've gone through and I found every grudge. Everything that I hate. Every aversion that I have, to use the Buddhist kind of word. And I've gone through and I've tracked it down to the earliest time I can remember feeling that. And I've gone through a structured process that's part of the 40 years of Zen to let it go. I could not do that work without a computer that has EMFs by the way. Hooked up to my

head and telling me what my brain is doing. Because I am not just that enlightened enough to know what my brain is doing without help.

Christine: No, I'm so glad that you mentioned this. And we see this clinically. Dr Klinghardt has this whole theory about this too. But he talks about for every unresolved trauma, there's an equal amount of stored toxicity in the body.

Dave: He's right.

Christine: And there's this whole aspect. I was curious your experience and then just sharing with people, let's say you go through these trauma work or neurofeedback and you feel like maybe you get a little bit more symptomatic physically to look there and maybe your body is mobilizing toxicants. And you need maybe binders, charcoal, chlorella, or a chelator. Not to see this as a negative side effect. But actually, not to see this a negative side effect. But actually, these things moving their way out of your body. So, I'm glad you see this too.

Dave: There is some kind of a mirror going on there, what happens emotionally and spiritually. It can happen physically. When people go through the 40 years of Zen program, we actually give them the Bulletproof liposomal glutathione as a supplement. Because the body probably is letting go of some stuff. Whether it's emotional stuff or physical stuff or both. Or maybe they're the same thing. And we just look at them differently. I have no idea. I don't have to know. But all I know is it seems like it's a good idea to have maximal detoxification going on when you're detoxing your emotional stuff.



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And there's a lot of people like me would have said, "I have nothing going on emotionally. Like I'm perfectly healthy. I mean look at my career, look at all this stuff."

And if you have that voice in your head right now, you are probably someone that needs it the most. The more you live in your head, the less you are like "I don't need any of that emotional garbage." The most you probably have a lot of stuff to let go of. I didn't know that when I was young. But I'm grateful I've dumped most of that so I can function the way I do now.

Christine: Yeah, no, I'm glad you are bringing all of this up. And I was just curious in 40 years of Zen is detoxification part of the intensive experience? But it sounds like you're addressing that which is great.

So, circling back, Dave, you mentioned something that caught my interest. And again, I had the same experience with guiding people with a technology like Rife. It's all about the frequency.

And if there are too many to choose from, there could be a lot of wasted time and not the right therapeutic effect. You shared that we are getting better at actually identifying what the body needs. And where its imbalances are and how to treat it. Are you talking about a piece of bio-resonance equipment? Or what technology have you found to help identify the frequencies that a person needs?

Dave: The lowest level technology to figure out what a frequency person needs is something that has been done for a very long time. And it's muscle testing. And it's like, "I don't

know, do you need this?" "Hold your arm out." And this is something that drives western scientists and doctors nuts. "That can't work." I'm like, "Oh my God, imagine this something around you that your body is reactive to." That you know that it's reactive to. Maybe that reaction takes energy. And maybe because that energy is taken, you will not have as much energy to raise your arm. So, there is another thing that you can do. Which is kind of cool.

In fact, I'll show it to you right here. This is a \$150 digital strain gauge. It measures the strength of your grip. So, if you were to take a really deep squeeze on this thing. It's meant really for measuring aging. It turns out if you have a strong grip, you're likely younger.

And if you have a weak grip, you're likely older. This thing thinks I'm 18. So, apparently my grip works. But if you know the power of your grip and you say, "Alright, I'm going to go take whatever this toxic mold thing is that I'm sensitive to or gluten, if I'm allegoric to gluten. I'm going to hold it in my field." And yes, there's a field. And if you're looking at this going, "There's no field."

Come on, guys. This is 2019. We have advanced physics things. We can measure the magnetic field coming off your heart. We know it's tipped eight degrees to the left. We know it's shaped like a Tauris. We know the direction of the lines of the field. So, you don't have to believe all that stuff. But if you don't believe all that stuff, then you probably should also believe in fairies and leprechauns. Because this is provable. And if you don't like it, then it's provable. Then you need to go like meditate or something because



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why would you have resistance to something that just is.

Anyway, back to this. You put something in your field, and you can show is my grip strong or is my grip weak? And you can have a practitioner do it. So, that's the easiest way.

And then there are a whole bunch of technologies mostly out of Russia, that will measure things. They have the vaga test or essentially electrodermal screening, where you touch acupuncture points.

Now keep in mind, 20 years ago an acupuncture point was a fantasy that did not exist in western literature. They would say, "Oh, there is no such thing. Those people are nuts. So, dangerous.

They are putting metal needles in the body. Who do they think they are?" And then they come along a little while later and said, "Oh, actually we just developed sensitive detectors. And it turns out there are currents running through the collagen in your skin all throughout the body." And funny enough, they match exactly to these old maps from China and India. So, "Opps, yeah. There is something here. Let's study it."

So, this is going on as well. And it turns out you can run electricity through those and look at what causes resistance in the body. And we know there's a resistance. There is changes in electrical resistance when there's an injury in the body. Which is fascinating. The guy who discovered that electricity has this level effect on biology, won a Nobel prize for fixing disjoint fractures in the body. But a tiny bit of electrici-

ty, it's like magic. What can it do? Well, we can now monitor those types of electrical flows in the body with equipment. In fact, Christine, I may turn that one around. What is your favorite one?

Christine: Well, you know, Dr. Klinghardt actually gave a lecture on autonomic response testing. So, if this muscle testing ideas is new, and I have never seen that grip strength in that tangible way.

Dave: It's called Camri. I ordered it on Amazon. It was like 150 bucks. I can't tell you that this brand is any good. It is just called an electronic hand dynamometer.

Christine: No, that's great. Because the more my patients self-test themselves, the better I can help them. And I recommended the Bio-Tensor or whatever modality that they just can get comfortable with. And start getting that biofeedback from their body. So that was a new one.

But Dr. Klinghardt talks about autonomic response testing. That's what we do in the office every day. And he also talks about the biophoton science. It's not a theory anymore. And he made the point to, because he studied that the fingernails have a high level of light emissions coming out of the hands. So, it's interesting, another way to think of WEAB can work. You are looking at where there are blocks and biophoton emissions.

And so, yeah. I'm a big believer in autonomic response testing and muscle testing. I'm always curious. There are so many technologies out there with bio-resonance. And again,



there's a lot of different equipment out of Germany and Russia that were always curious about.

But while that is important, I think the intersection between that information and then that there's something that happens between the practitioner and patient, that that energetic exchange. Where I think, you have to leave room for intuition, right? And leave room for that therapeutic relationship to also give insights. That's my experience.

Dave: Let's just look at this really scientifically. Alright, we are going to test some sort of, let's just say a drug or acupuncture. It doesn't really matter. We're going to test some sort of healing modality. So, we identify a group of patients. And we say, "Alright, we want to test all women would be 40 and have a certain type of genetics and have this condition." So, we march them all in. And then we sit them all down. And then we have a doctor apply whatever the thing is. And then we say, "Oh, look. It works or it doesn't work."

Now there is this thing, it's amazing, we call it controlling for external variables that we don't think about. Well, the big three things that are involved in that system are the patient, the modality, and the healer. And the amount of scientific hubris that it takes to say, "Oh, the healer doesn't matter. Only the modality and the patient matters. It's insane."

In fact, when people say, "We accounted for all external variables." You can just look at them and say, "Oh. What type of lighting was used in the office?" And they go, "We don't know." Well you did a pretty crappy job of accounting

for variables. "What phase was the moon in?" They go, "That doesn't matter." You go, "Well, I don't know. Talk to an emergency room doctor. Because I'm pretty sure when there's a full moon that everyone goes nuts and it's reliable. Talk to any police officer." In fact, yes, you can track what the phases of the moon due to human biology.

And it even gets worse with mouse studies. You think, "Okay, that's going to be safe." Guess what? If a woman feeds the mouse, it changes what the mouse does versus if a man feeds the mouse. Did they control for that? In all of the mouse studies that we've ever relied on. No, they didn't because no one noticed. So, to say, they're controlling for the variables that matter. No. You cannot remove the healer from the modality. It is a system of biology.

The double blind studies are never done to control for all the variables. They're just the ones that someone thought mattered. And it didn't even record all the other variables. Like, I don't know, the state of the electromagnetic frequency environment in which they performed the treatment.

In fact, would you believe, Christine, I'm working with a company now. 32 patents behind what they're doing. They can take a drug, they can submerge it in a liquid helium cooled heavily shielded chamber, get the magnetic signature of the drug, after they filter out all the other electromagnetic stuff. And play the stuff back with the POLST magnet. And get drug like effects in mice, no placebo in mice. How is that happening? I don't know. Maybe there's something going on there.



Christine: Absolutely. And this idea of evidence-based medicine. And we need to use this to guide treatment. I mean, you know, you are where you are because you didn't rely on that.

And many of the patients that we see, we are their 30th doctor. There are all these opportunities for them to be helped by this model. And they're not. And that's really why we're having this conversation today. It's to really open people's mind to how our body functions. And how we can use these therapies to help heal our bodies.

And so, I'm in complete agreement. And you know, it always surprises me, especially the neurologists, right? How confident they are. I just think about it, and again, not knocking them. They are these brilliant people who go to school for so long. And then, I would be frustrated too. They have four medications that they prescribe. And that's all. Their toolbox is so limited. And maybe the area where we get critiqued in alternative medicine, we have too many modalities. There are too many choices, right? We have to kind of reframe how we look at what works and what doesn't. And again, how you said there's many, many variables.

Dave: There's a lot of variables. And also, you don't have to do everything that's possible in order to heal. You just want to find something that might work. And it's amazing what the intuition of a good healer is. They're going to look at it and go, "You know what? I haven't thought of this in like 20 years, but there's this one thing. And you just made me think of it. So, why don't we check this out for you?"

That's why you go to an expert like that. Which is profound to me.

And there's also a lot of fear in doctors right now. And this reminds me of this fantastic book from 1984. If you can find a copy, it's going to run you about 1200 bucks. And it's called *Hormones, Brain, and Behavior*. This book is from the head of the Karolinska Institute, which is arguably the top medical school on Earth. It is certainly one of the top 10, depending on which one you studied at, you can make that argument. By the way, I'm married to a doctor who graduated from Karolinska. And she would beat me, if I didn't say it was the best.

However, this book goes into incredibly deep detail into the bioelectric stuff that happens in each cell in the body. And you know, the guy who published it? He published it the day he retired from the Karolinska Institute. Because he said, "As soon as this book comes out, they're going to take away my position here. Because it flies in the face of what we've been teaching for all this time." I mean, this is one of the books, I am pretty sharp as a science writer, a professional biohacker, and all that. There's stuff in here that's really deep on the med school side of things, beyond what I understand.

But when you go through it, you realize, "Wow, this stuff is so provable, and we understand these tiny gradients in electricity." But when you and I talk, we didn't learn this in seventh grade. No one talks about this. In fact, it sounds like crazy pants. But this is actually how it works. And when you realize someone



at that level can write this textbook, which is meticulously researched. And is afraid to talk about it until he's basically like, I'm done with my career. It takes a lot of courage to go out there and talk about what's going on.

Christine: Absolutely. You know, the people who change the paradigm are not always accepted at first, right? They're heavily criticized. That is usually a good sign that they are on to something, right?

Dave: Yes.

Christine: So, Dave, let's bring it back to what does this look like in your daily life right now? What kind of routines are you implementing to keep your body healthy? And what does that look like right now?

Dave: Well, one of the things that makes the biggest difference for me is sleep. So, something that I do every night is I wear an oura ring. Check it out, I'm going to use some e-maps right here on my phone. I'm going to look and see what my sleep quality was last night. Because sleeping well makes almost everything better.

So, here's what this looks like. I slept six hours and twenty-seven minutes last night. And you go, "Oh my God, you're going to die." Guess what? People who sleep eight hours a night, die more from all causes than people who sleep six and a half hours a night. 1.2 million people studied over three years, that's pretty good data. And another recent study of thirty-two other studies found the same thing. That's not to say sleep less to live longer. It says if you're healthier, you need less sleep.

But here's the kicker. I don't know if your camera is going to be able to pick this up or not. But I got an hour and a half of deep sleep. And an hour and a half of REM sleep in my six and a half hours. Now, that's pretty good. And you know this as a, as a doctor, Christine. That's very good amounts of restorative and brain repairing sleep. Which is kind of cool.

So, number one, I monitor my sleep and I do what it takes. The reason I can get deep sleep like that every night is I wear these things. They're called the true dark glasses. I started this company. These are patented. I put this stuff in the world.

So, yes, I have a bias here. These are not blue blocking glasses. If you're looking at me, I look a little bit like cyclops. These are blocking four frequencies of light that are all documented to interact with the timing circuits in the brain. I can wear these. I can fly to New York from the west coast. I don't get jet lag anywhere on the planet, if I wear these glasses.

But after fifteen minutes, when I look at what my brainwaves do with EEG, I'm seeing the fast aggressive awake waves go down. My alpha waves go up. And they make you relax. Like noise canceling headphones for the eyes. I wear these an hour before bed. And yes, I look a little weird or a little bit like a rock star, but I sleep twice as well as I did before.

And during the day, what am I doing? I am modifying the frequency that goes into my eyes. Which is controlling the brain. 5% of the cells in your eyes, the optic receptors, they don't go into what you see. They go into your timing sector. Those are called the melanopsin

sensors. During the day, when I'm looking at bright screens, I wear the true dark. They are called day walker glasses. The ones I'm wearing right now, block 40% of the blue light. And they look like normal glasses. You'll often see me in ones that have more of a yellow tint that blocks 75%. The reason for that is that if you're getting lots of blue light without all the other sunlight that normally comes with it. It actually makes you tired. And there are studies that show excessive blue light exposure, reduces your ability to manage your blood sugar. And it lowers sleep quality later in the day. So, I am controlling the light that goes into my eyes.

I lower the temperature of my bedroom before I go to sleep. Another study shows 68% increase in depression amongst people who sleep in bedrooms that have the amount of light that comes in around curtains in the average city from streetlights. My room is blacked out. And I live on a farm where there is no external light anyway, unless it's the moon. I live in Canada. So, we get some sunlight late at night. But I sleep in a sleep cave. Just that alone. What a difference.

Before I go to bed, I also have this thing that looks like a remote control for a car alarm. But when I press this remote, it disconnects the electricity in my bedroom from the wiring in the rest of the house. It does it for my kids' rooms too. So, I'm sleeping in a low EMF environment. The Wi-Fi, and yes, I have a Wi-Fi in my house. It's off 95% of the time. Because I don't need it. I have ethernet cables in all the rooms. But if I want to turn on Wi-Fi, I just flip a switch. And I turn on the Wi-Fi. But when I

go to sleep, there is no Wi-Fi on the property. It's 30 plus acres. So, I am sleeping electrically grounded to the earth, with no EMFs, in a cave. Wow, what a difference.

Christine: I'm really happy you share that because it can feel really overwhelming, right? When you learn about EMF and again, it's cumulative exposure over time. And if we can improve our sleeping environment and our sleeping location. This has a huge impact on our health. So, no, I appreciate you sharing all of that.

Thank you for making these tools more accessible with your glasses and everything. I have patients who are using them more and more. And it makes a difference for sure.

Dave: Thank you.

Christine: So, Dave, you've been ahead of the curve obviously in this type of medicine. Is there anything that you're really excited about or anything new on the horizon that you've learned about that you're excited to see come out more?

Dave: Right now, we are figuring out that frequency light, sound, can cause the cells in your body to turn into stem cells. Or cause stem cells to become undifferentiated so they can become something else. This is crazy stuff. You can take blood. You can pull something called v-sels out of the blood. And these are like stem cells.

And wow, you draw blood, hit it with some ultrasonic frequencies, let it grow for a little while, and magically you now have something that can go in and cause repair in the body



the way a child can repair. That's kind of cool. Because I've had my bone marrow taken out. I've had my fat and turned into my stem cells and reinjected. I've had stem cells pretty much everywhere you can have them. And yeah, they make you younger, stronger, and cause healing, things like that. But the ability to use these frequencies to change the behavior of your cells, so they will do what you want them to do. That has me pretty excited.

Christine: Yeah, that has me excited too. You know, way more accessible, right? Therapeutically of when this comes out.

Dave: It's our job, Christine, to take these technologies that frankly any Hollywood kazillionaire or tech CEO can access if only they know they exist and are willing to try it. And make them as accessible and affordable as cell phones. You go back 25 years. The cell phone was \$20 a minute. And only the investment bankers had them in the back of their Mercedes. And it took up half the trunk. And now it's a dollar for a cell phone in Africa.

Well, stem cells, are going to be the same way. And by talking about it the way you are in this Summit and talking about all these technologies for healing and restoring the human, all these bioelectric things. I think you're doing a great service. Because when people understand, "Wait, this is out there. It didn't require me to spend \$1,000 on drugs every month. And I can get better. I can live longer." It's our birth right. We may as well do it.

Christine: I appreciate you sharing that. And you know, when you're on the front lines and seeing so many people sick today. We want

all the success for our patients as you've had for your health. And so, I appreciate that. And that's what keeps us all motivated and passionate about this work for sure.

So, Dave, I could pick your brain all day. And I really appreciate your time, all of the work, and the passion that you brought to this field of research and medicine. And bringing this out to the public more and more. Where can people find more about you, your podcast, and your work? Where should they go?

Dave: Check out Bulletproof Radio anywhere you like to download podcasts. There's 600 episodes with some, you know, basically people who are the creators of their fields of medicine. And some other people who have just applied this kind of biohacking idea to becoming the best in the world at what they do.

In fact, right before we got on the phone here, I just interviewed the Bryan Brothers, the tennis champions who have won some like 118 major tennis tournaments, Olympic gold medalists. These twin brothers who are just doing crazy stuff. And one of them is all bulletproof and biohacking his way into doing this. And he's the one without a metal hip. And the one who doesn't do as many of the healing things, just got a new hip last year.

So, it seems like you can get at an advantage no matter where you are in life. But Bulletproof Radio will show you how to do that. I do recommend maybe downloading or at least pre-ordering my new book. It's called *Superhuman: This is What I'm Doing to Live to At Least 180*. *Headstrong* and *The Bulletproof Diet* are also good places to start.



Christine: Well, thank you Dave. I'll be sure to check all of that out. I listened to your podcast regularly. And it keeps me, I feel like in touch with the latest innovations that we bring to the treatment room. So, thank you for doing this service for all of us.

Well I'll let you get back to your world and your farm. Thank you for having the time to do this.

Dave: It's been my pleasure. Christine, you are a fantastic healing. And thank you for continuing to do the work you do.

Christine: Thank you, Dave.



Light and the Human Biofield

Dietrich Klinghardt, MD, PhD

Christine: Welcome, everyone. I'm so excited to interview Dr. Dietrich Klinghardt. He's my mentor and colleague and friend. We do a lot of work together at Sophia Health Institute. And he has taught me everything I know. And one of the foundational tools that we use at Sofia is a tool that he developed, called Autonomic Response Testing [ART]. This is a very sophisticated system, grounded in the theories of biophoton physics and looking at how that affects our body and our autonomic nervous system.

We've been able to really treat people in a very unique way. And he's been pioneering the theories and the thoughts around chronic illness for a long, long time. So it's an honor to interview you. And why don't we just jump in, Dr. Klinghardt, on how did you really develop Autonomic Response Testing, and what led you to this modality?

Dr. Klinghardt: So, of course, this goes back quite a ways. I had the fortune in medical school that we had a compulsory course in acupuncture and homeopathy. So, sort of through acupuncture at medical school, I got in contact that most likely, many of the effects, positive effects in acupuncture, are related to

shifts and changes in the autonomic nervous system. So we had a bit of an insight into that. And then I picked my thesis. And in Germany, you either do a board certification like you do here in the US, or... I was never interested in seeing patients, and so I wanted to become a researcher.

So I chose to do a thesis and do four years' of work with experiments. And basically, my thesis was on the interaction of the autonomic nervous system with the immune system. At the time, there was very, very little known about that. Later on, Candace Pert got a Nobel Prize for discovering that the cells of the immune system are under control of the autonomic nervous system. So there is a history.

So, after, in the years when I was doing my basic research with patients, I was desperately looking for various instruments to measure the activity of the autonomic nervous system. So, we used a whole variety of instruments. And because in the same years, I also enrolled in courses in psychology, I came across the lie detector tests that were very sophisticated already at the time; that looked for changes in the autonomic nervous system. So if somebody speaks a lie, and they have any



consciousness in them left, they go in a stress reaction, which you can monitor with a variety of tools.

Then it was really 1976 or so, I met Dr. Voll, who had developed the EAV system, Electroacupuncture According to Voll. Which basically measures the acupuncture points, but the moisture content at acupuncture points, which is determined by the activity of the autonomic nervous system. So the first thing I learned was electroacupuncture. I got pretty good at it. I came to the US. I immigrated; got in trouble with the FDA very early on. They repossessed my German equipment.

Then I was looking for other ways of determining the status of the autonomic nervous system. And that led me down the road of applied kinesiology on one hand, but also down the road of Omura's bi-digital O-ring tests, which is really an independent development. And neither one of them, neither Dr. [Woodhart] nor Dr. Omura understood that the changes that they were observing when a strong muscle goes weak or a weak muscle goes strong, were actually caused by changes in the status and the tone of the autonomic nervous system.

And so that allowed me to develop my own understanding and my own system, by knowing what I knew about the autonomic nervous system and bringing it into the realm of applied kinesiology and O-ring testing. Changes in muscle strength being determined by the status of the autonomic nervous system. How the autonomic nervous system does the change in the muscle tone, there were several studies in

the 90s that showed that actually, the muscle spindles, the central organ in a muscle that determine the muscle tone, are autonomically innervated. That was part of the truth.

But in the last two years, through my friendship with Gerry Pollack, who wrote the beautiful book, *The Fourth Phase of Water*, it became clear that the nervous system actually initiates changes in the state of the water inside the muscles. And that is really the real reason why muscles change in strength. It has entirely to do only with the state of the water. The exclusion zone water, versus non exclusion zone water, there's these shifts that happen in the muscle that determine the change in strength. And that is very new, but it's still based on impulses that travel in the autonomic nervous system.

Some of the autonomic nervous fibers... all nerves contain on the inside, light conductive structures called tubulin. And when we send an impulse in muscle testing, by placing something near the patient, that information actually travels with the speed of light through the system of the patient. And the changes are instant, they're not at the change of normal nerve conduction. At the speed of light, the changes will be measured. Omura measured that at the Japanese University where he demonstrated that way clearly.

So yeah, my own history really started with acupuncture and then led over, the work with my own thesis, the more medical side of understanding the autonomic nervous system. To working with EAV, then applied kinesiology



and O-ring testing. And then really realizing some of the faulty assumptions that were in all the other systems. And trying to correct that and come up with a system that has no mistakes, no logical mistakes; and that is based on the understandable aspects of biophysics. And I think we've achieved that with ART.

Christine: So, Dr. Klinghardt, can you walk us through, what does this look like in a clinical setting? So, what does the typical doctor patient exam look like? And I know there's a couple of tools that we use, and then there's a system that's very unique to ART that makes sure that we're asking the right questions and getting the right information, before we continue to go deeper into the exam. So, can you just walk us through? If this is a new topic for anyone who's listening, just really walk us through what this looks like.

Dr. Klinghardt: So of course, when a patient comes to us, first of all, the patient has a set of symptoms. And then we look at, «Well, what's underneath the symptom?» And of course, the first level of explanation very often is either structural, the patient had an accident; that there's a shift in bones or fascia or a tear of the ligament or muscle. Or its biochemical, which is really like that love affair of America right now to try to explain every symptom with a set of changes in the biochemistry. «You're lacking hormones or you're lacking your antioxidants, or you're lacking minerals.» And we found that underneath that is changes in how the body self-regulates itself. That is the main theme of what we do.

And regulation means the physics based activity that leads to changes in the biochemistry. A simple example is that if you're under stress and you're eating, the stress creates vasoconstriction. And so if the blood vessels that are lining your gut are constricted, you will not absorb much of the food that you're eating. And if you're in chronic stress, that means if you're for months or years, not absorbing your food, and then you check the biochemistry, you will find that the patient will be severely mineral deficient and will be deficient in amino acids.

And then the faulty mistake that the functional medicine doctor does then is, «Well, you need to have a higher protein diet,» or, «We need to give you a high amount of minerals.» For us, we look at, well, it's the autonomic nervous system that has created vasoconstriction in the gut here. And the autonomic nervous system, of course, originates in the hypothalamus. And what are the influences on the hypothalamus that makes it have this increased output? And that's where we came up, Louisa Williams and I, with the seven factors that are sitting behind any stress.

That is, you know, it could be toxicity. The hypothalamus is not protected by the blood brain barrier, it could become toxic with mercury or with lead, or with aluminum. It could be infection. There could be viruses in there. There could be Lyme disease in there. It could be stress from electromagnetic radiation. So, instead of looking at the biochemical outcome of something, we're looking at, how is the body regulating itself? Why is it not up regulating the digestion? Why is it not creating more



blood flow in the intestinal lining? Why is it not creating more gastric juices, more pancreatic juice; more liver juice? What are the blockages? And we call that blocked regulation.

And so the first step that we do in our testing, is we're looking at where the body is blocked, what is blocking it, and what is needed to unblock it; rather than looking at where the symptoms are. It could be that you have chronic knee pain on both sides, but it could easily be that we find out that your... in acupuncture, many meridians go through. The liver Meridian, the kidney Meridian; the spleen Meridian. So it could, for example, be that the patient simply has a spleen that's overloaded with breakdown products from microbes. The spleen dismantles aging blood cells, and if they're infected with Babesia, it could be that the spleen is overwhelmed with Babesia, and this is why you have knee pain.

And so we're looking, and we find in our testing, we would find a blocked spleen, rather than looking at the knees. We first look at where's the patient regulating? Where is the system, the autonomic nervous system, switching on and off and doing its job and where is it not? And so this is a search that we do in the beginning for blocked regulation. We find the cause, for example, in this case, why the spleen is blocked. We may put some medication on to the patient that addresses Babesia, after we make the diagnosis. Then we will find that suddenly the knees don't test anymore and there's blood flow in the knees. And there is a healthy immune system in the knees again, and things are working well.

So that's the first step, is, how is the body regulating itself? Is your autonomic nervous system activating the immune system in proper ways or improper ways? We know now that all inflammation, not just some but all inflammation is driven by the autonomic nervous system. If you shut off the autonomic nervous system, the sympathetic nervous system, there is no inflammation in the body. That is fairly new. And so rather than looking at the outcome, leading anti-inflammatories or anti-inflammatory strategies, our anti-inflammatory strategy is looking at, what is the autonomic nervous system doing or not doing? What does it need to function better? And these are very, very different interventions.

That's the first part. So, we looked at, where is the body blocked and unblock. And then the second part is neurogenic switching. That is what we learned from the chiropractors whom I owe a lot to. I will never speak bad about anybody from the chiropractic community, there's a lot of healing that comes from there. So, switching is the inability of the body to appropriately conduct impulses from your thinking, to executing the action.

So for example, if you drive in a car, let's say you're in the passenger seat, and your wife is driving, and you tell her, like when you're going somewhere, like where you've been, but she has not. And you say, "Well here, at the next crossing, you need to take a right," and she takes a left turn. She had the impulse, she got the information, take a right turn, but somehow, between receiving the information and executing the action, the steering, she



goes the wrong way. Now, this is a macho example from the old days, you know, before the Me Too movement. So it could be the other way around, of course, also.

The switching can happen on any level. Like for example, it can be on an emotional level. You get a phone call that a friend died, and you start laughing, instead of crying. We've seen that the more common thing that many of the listeners will know, from the influence of the screen, the computer screen in front of you, and the effect it has on your brain. When you're fast typing, many of you will have observed that sometimes in some words, you transpose letters. You put the third letter before the second one. There's these slight switches. That is a very common thing that people have brought to me, a common form of switching that is induced by the computer screen.

That means there's cellular neurons in the brain that are not quite sequencing things properly. So, we call that switching. And we have a set of tests, early on in the treatment, after we establish good regulation, we establish that the patient has no switching. And again, the causes for switching, it can determine with our method, very common, it's a scar from a surgery. It's a wedding band in an unfortunate marriage; unlucky marriage.

Sometimes it's toxic clothing or a toxic bra that people wear. Sometimes it's makeup, the phthalates in the makeup. Very often it's a root canal, a root filled tooth or a dental material that you're not compatible with. And that can

be a little bit of a search, but in general, we find the cause of switching, and resolve it. And that has a huge impact on the patient's health, on the biochemistry, on the wellbeing, on the essential health that the patient has later. So that's the second step.

And then the third step is that we check each individual organ for the organ health because that's what drives our health. We assume, and I assume correctly that changes in the musculoskeletal system, chronic pain, changes in your structure, are most often secondary to dysfunctional organs; to organs that are suffering. And so we very, very carefully look at organ health. In applied kinesiology, usually you test the muscles that are related to a particular organ. In some of the more esoteric forms of kinesiology, you may touch the organ and see if it creates a stress reaction.

What we actually do, we stress the organ and may really massage or squeeze the liver, squeeze some juices out that are in there, in a very deep and very physical way. And then see if that causes stress and then find out what is the stress? Is it glyphosate that comes out of the liver, if I squeeze it or is it parasites that I'm squeezing out? Or is it viruses that I'm squeezing out? And then we can determine appropriate treatment for what we're finding. So that's the third set of tests that we do, is simply looking at organ health.

And the last thing that we do is examining the symptom of the patient. So let's say the patient came to us with chronic headaches, the first thing we do, we look, how is the system



regulating itself? Second one, is there any switching? Third, is there any organ problems? And when that's all cleaned up, then we may look at the headache and see what the stressors are that we find and what are the remedies or the measures, the techniques that we need to use to mitigate that stress.

Christine: So, Dr. Klinghardt, two things that are unique to ART, are something called a signal enhancer, and then also a pole filter. And you did a great bonus video on the biophoton theory in the human bio field and how light interacts with that. But can you just integrate how the signal enhancer and the pole filter, you know, bringing these concepts to light for our treatment?

Dr. Klinghardt: I hope that most of the listeners can listen to the bonus podcast on the biophoton science. It's not biophoton theory anymore, it's now biophoton science. So the signal enhancer, first of all, it's a piece of plastic that has to have certain dimensions, a certain height and a certain width, and a certain geometric form. And it's made of a material, a plastic material that has an absolute perfect crystalline structure. Where each molecule is spaced exactly the same distance from each other, in the same spherical arrangement; that is very important.

And on a surface, it's like this; that when I place a certain, let's say 500 milligrams of vitamin C on the signal enhancer, and the signal enhancer is near the body, then the body will behave as if it's already taken vitamin C. And not just that but the body will behave as if it's

taken exactly 500 milligrams of vitamin C. So the unique thing with the signal enhancer, it translates what we put on there, into a reaction in the body, as if the body has consumed it. And of course, in applied kinesiology, you do that also, you put 500 milligrams of vitamin C on the tongue and see how the body behaves.

Well, the trouble with that is, you can't take it away, so the body is now already in a changed situation and really, your testing is finished for the day. And in our system, we can put vitamin C on there, 500 milligrams, a thousand milligrams, 2,000 milligrams, and we have a way of determining that way, how much a body exactly wants. And then we can take it away and test the second item and see what it will do. Then we can test the synergy. We can put two items on there and see if they're working together or not.

That's one aspect of it. But the deeper aspect of that is that the signal enhancer is made out of a particular plastic, there's nothing electric or electromagnetic in it. What the signal enhancer does, it extracts from the substance that we put on there, simply the light emissions that the substance has; and amplifies those and communicates via the light wave, with the body. Not electromagnetically, not on the lower levels of electromagnetic frequencies, but on the level of light.

And I think that it's important for the listeners to understand that the way life works, is sunlight is converted by plants into substances that contain the light. Chlorophyll is a carrier for light that basically binds light up and then



releases it, if somebody eats that leaf. So, basically all food can be looked at that ultimately, in the mitochondria in our cells, the light that was stored in the food is released back into the system. And in terms of biophysics, the transport of electrons in the mitochondria is not the ultimate thing that happens in the mitochondria, but is actually that each electron carries a cloud of photons with it. And it's actually that the food that we eat, gives off its light in the mitochondria. And that's actually what creates the energy.

When we go back to the signal enhancer, the signal enhancer only extracts the ability to give off light from the substance we put on there. And so it's simply measuring of how much light is the substance able to give us? What color, what qualities, what frequencies of light are they? And the body responds to it and says, "Yes, I need that light," or not. It's very, very different from putting a substance in the hand of a patient, where the electromagnetic fields of the substance plays a role. The chemistry of the substance plays a role, and other aspects come in that ultimately are irrelevant.

Because when we test with the classical other methods of testing, for example, in Goodheart's Applied Kinesiology, when we put food on the tongue and then see what the effect is; that test cannot predict because the food, when we eat it, it goes to the stomach acid. The complete biochemistry alters the biochemistry of it. Then it goes through the alkaline juices of the pancreas, which again completely alters the substance. And then comes the parasites and the gut microbiome, which

actually eat the food. And what we're getting is the poo that comes out on the other end. And nobody can, until today predict that.

What is constant, however, is the light that is stored in the substance that does not change through the digestive process. The light and the quality of it that will ultimately give off to the mitochondria, is predicted by what we put on the signal enhancer. It's a constant that has not changed.

And so, we're testing the food, not based on this biochemistry, but a vitamin, on its ability to give off light once it's transported the breakdown products that transport it to the mitochondria. And that will be a constant that is not altered by the gastric juices. So I don't know if some of you may understand the gist of that. That is the essence of the signal enhancer. It's a fantastic tool, developed by a brilliant physicist in Munich, and brought to us through contacts that I had as a friend, with various people.

The second part, the pulsator, originates from Fritz-Albert Popp's measurements that the body gives off light in strictly polarized planes. That means in parallel planes that come out of the body like this, next to each other. Like a book, like the pages of it. If I would put a book in front of me with the pages next to each other, that's how the light comes out of the system, if the system is healthy. And the clinical observation was very simple, if I place a port filter that has a linear grid on it, in front of the body, where the grid is aligned with how the light comes out of the body, a strong indicator



in muscle testing will go weak. If the light that comes out is chaotic, or there's no light coming out, I can put there that the arm is not going weak.

This simple principle has allowed us to detect places in the body where the body cannot create coherent light. And it has been the predictor of all illnesses. And it predicts illness very, very early on, where you would get ill, but also later in the illness.

So, early in the illness, the light may change its angle that it's coming out, and the intensity may get weaker and weaker. But once an organ is physically ill, it doesn't give off any light or the light that comes out only carries the information of pathogenicity. This is later on, its work with the mirror that we do by reflecting that back and the body goes into stress reaction, but I don't think we should talk about that here yet.

It's another level of biophoton physics that's very real, and has allowed us to take another jump into diagnostic accuracy. But the pole filter is a brilliant, brilliant simple tool. It has a linear grid on it. If you align that with the grid of the body, strong arm goes weak, if it doesn't go weak, the body is not emitting polarized light. And that means that place needs to be examined and needs to be diagnosed, and needs to be treated.

Christine: Dr. Klinghardt, another aspect of ART is the ability to either directly test the patient or indirectly, using an indirect to test the patient, and that can be unique to some

patients who experience this. Can you just describe a little bit about how this actually works?

Dr. Klinghardt: Direct testing is when I use a patient's own arm or own hand muscles, and see what changes happen when I place things near the patient or on the patient. Indirect testing is if I put a person between the patient and me, and induce still changes in the patient's stress reactions by placing, for example, a bottle of wheat on the signal enhancer, when the patient is wheat allergic. And what we do understand, every stress reaction that the patient may go into, is a change in the bio field of the patient. And the bio field can be conducted through other people, through a number of other people.

The principle was discovered by Professor Omura, in New York; that when I do muscle testing, for example, on a patient who has a chronic illness, and the illness is affecting the nervous system of the patient, I cannot use their own arm to get accurate readings. Because the body is not able to respond in reproducible ways, if the nervous system doesn't function.

But if I put a person, a healthy person, between the patient and the doctor, and use the in between person's arm that has a healthy nervous system, and I induce stress in the patient by placing something there. That stress change in the bio field will be conducted into the in between person, and will create a weak arm or a change in the indicator muscle in that person.

Now, Omura did multiple experiments with that, and they're all published in peer reviewed journals; done at several Japanese universities. I think the important thing with the indirect testing is, the important outcome was, it is more reliable, and more reproducible than the direct testing. So I'm going to test on the patient, there will be mistakes because of the illness itself that is affecting the nervous system of the patient, and the muscular system. And if I put a healthy person in between, my reliability and validity of the testing goes dramatically up.

And that has allowed us to be far more accurate with our diagnostic work. And that has allowed us to find things that nobody else found; the retroviruses, the severity of aluminum, glyphosate toxicity, and fluoride toxicity. These are all issues that other systems were not able to find, even though they're foundational to the current health crisis. And it's really only through the indirect testing that that was possible.

Christine: Another principle that we use is this idea of resonance and direct resonance. And you use this in order to find out what is affecting certain parts of the body. And also, this idea of drug uptake, and where there can be an impaired drug uptake in the body. And I think that's a unique concept as well; that even though you might have the right medicine and the right diagnosis, there could be some blockages in your body for getting that medicine to the right tissue. Can you just describe that for us?

Dr. Klinghardt: So, the resonance phenomenon between identical substances, published by Omura, was discovered in the 1940s, and the Manhattan Project in the US. But to make it simple and practical, basically, when a certain amount of, let's say, scattered mercury is in my thymus gland; and I hold my hand over the thymus gland, probably nothing happens. But when I put a similar amount, a similar concentration of mercury into my hand and hold it over the thymus, there is a resonance between the mercury that I'm holding in my hand and the one in the thymus gland. And I will trigger a neurological reflex that will change the strength of all muscles in the body instantly.

Again, it has to do with the phase change of the water. So, this is called the resonance phenomenon between identical substances. That allows us to find deposits of mercury in the brain and the ear and the eye and the heart, and the kidneys. It allows us to find very specifically, Babesia or bartonella in your brain and your heart; in your shoulder. And anything we have a tester for, we can find in the body. By the way, also, we can use the laser technique that I developed, where we can look at the sky and find out that there is aluminum in the clouds and glyphosate in the clouds, and retroviruses in the clouds. That has allowed us to take a much, much deeper look at what's done to us.

But in terms of the resonance phenomenon, it's called the resonance phenomenon between identical substances and that is the basis of our diagnostic work. Now, the special sub form of that is, for example, if I have



somebody who's got chronic migraines, and I determine that, say they have a lack of vitamin B1, and the test is energetically beautiful, like it would fix the migraine, and we give it to the patient and nothing happens. It allows us now, after giving a substance to the patient, we can take a small amount of B1 and hold it like over the knees and over the thighs, and over different body parts and see if the B1 or B2, orally has arrived in those tissues.

And very often we find that exactly in the tissue where the body is symptomatic, nothing arrives. And there's lack of direct resonance. And then one of the highest levels our work is sent to find out, why is it not arriving there? It could be a scar that has never been treated. It could be a psychological issue. It could be a toxin in the body. It could be the watch the patient wears. It could be the hair dye that they're using. It could be a cosmetic agent, a body lotion that they're using. And that is a very, very high level of our work; to determine, when we give drugs that are... it becomes critical, for example, in cancer.

If you have, let's say, a ductal carcinoma in the left breast, and you give artesunate and Hypericin and curcumin, and all the things that you have tested out that would shrink the tumor, but it keeps growing and growing. So, what we do as an additional test, we see, does the curcumin really arrive there? You can simply do that with the direct resonance. And nine out of 10 times we find that the actual active ingredient that will heal the cancer is not arriving there. And I just had a patient who was very close to my heart, who had a metastasiz-

ing ovarian cancer. And she was making some progress but much slower than we wanted. And I could see that half the medicines they were giving her were not taken up by the tumors.

And we found out that she's sleeping on a geopathic disturbed sleeping location. And then, just as an, "Oh, by the way..." sentence from her husband, I found out that for five generations in the same house, in the same sleeping location, every woman had either ovarian cancer or breast cancer, which slept in that location. And we found immediately that through the drug uptake, she had no drug uptake in the tumors; and only when I did our test for geopathic stress, I found out that that was what was blocking the uptake.

So, this is a very, very exciting part of our work, and I think also the most overlooked part of my work. And I do have to give credit here to Dr. Yoshiaki Omura, who developed the whole knowledge base around that and published it. It's the International Journal of Acupuncture and Electro Therapeutics Research, where all these findings are documented. It is a peer reviewed journal that has a high level of ranking in the scientific community.

Christine: So, Dr. Klinghardt, if people want to learn more about how to learn ART, I know that you're really passionate about sharing this information, how can they best learn this right now?

Dr. Klinghardt: Well, there are different ways. So, my favorite courses are the ones that I



teach in England because every level of the course is taught by myself, ART1, ART2, and ART3; so, there are three two day courses. Here in the US, it's currently taught by the Klinghardt Academy. The courses in England are taught by klinghardtinstitute.com, which is my primary teaching organization. And of course, you know, Christine and I have discussed also using Sophia Education for future courses, to teach this work, which we're planning on. But currently, it's Klinghardt Academy or Klinghardt Institute. And Klinghardt Institute, for those of you who can make it over to London, they're very sharp courses, and there is also internet based training available at Klinghardt Institute.

We have many people in the US doing ART on different levels. I do see that the highest level is still at the Sophia Health Institute, where everybody is very well trained, and following the same protocols and using the same tools. And so, to learn the work, it's good to be a patient. And otherwise, to take the workshops or on the internet. And the Klinghardt Institute has these 10 modules, it's an internet based training of this method. So, people that are smart that don't need the hands on guidance, they can also learn it, just by watching the modules.

Christine: Thank you, Dr. Klinghardt. And so as we wrap up, what are you most excited about in medicine right now?

Dr. Klinghardt: Well, the most exciting is also the most saddest thing. We're realizing that first of all, the whole Western world is becoming chronically ill, that's the sad side

of it. But the causes of the chronic illness are really very limited. It's the farming chemicals, that's number one. And within that, glyphosate has a leading position. It's aluminum that comes both from the sky, you know, from the geo engineering project that nobody dares to talk about, and some from the vaccines that nobody dares to talk about. And then the third one, of course, is Wi-Fi, which also very few people dare to talk about, because it's very powerful interests that are behind these things.

But the exciting thing for us is, if we reduce chronic illness to like three things, and these three things, we can detox our patients; we can protect our patients. And when we do that, it turns out that 80% of chronic illness can be reduced to these three simple things, where we have simple protocols that we can put people on. That are very effective, they are safe. And then, you know, the rest pretty much is Lyme disease. And so based on these three basic things, the immune system gets disabled and we get the retroviruses.

You get the herpes viruses, and Epstein Barr, and you get the Lyme disease, core infection, and the mold and the Ritchie Shoemaker; it's all in there. But that's all secondary to some primary things. For me that was an exciting journey to find out that actually, when we go deep enough, we can really, really help people to regain their health. Sometimes it takes longer, the body has an almost endless capability of storing toxins; of dealing with something. So, detox takes longer than most laypeople think, you know, to get back to a functional



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state. But it's not that difficult to stay healthy, once we actually regain it.

And so I'm very excited about that. Of course, you know, I'm excited about the new possibilities. Once you actually conquer the infections and the toxins, and the new possibilities with stem cell therapy and the exosomes, and the color therapy. We just got several colored lasers that we can do intravenous color therapy, intravenous laser irradiation of the blood. That's a phenomenal, wonderful new tool that doesn't involve any biochemistry.

I'm a little bit jaded against biochemical interventions. Even though of course, I take my vitamins also, and so I'm not totally against it. But I think my understanding in good medicine is, there's three things that need to be paired. One is good or decent biochemistry. The next one is decent biophysics. Use electric field, color therapy, colored lasers, sauna therapy, foot baths; hand baths; use that. And the third

one is good psychological interventions. And all of these are fun. So, to get well can actually be a joyful journey. And so that's kind of where my excitement is.

Christine: Well, thank you, Dr. Klinghardt. And I know you worked hard today and you're doing this at the end of your day. But I really appreciate all that you're doing for our patients and to further all of our knowledge. And thank you for doing this talk today.

Dr. Klinghardt: Thanks, Christine. And wish you a good evening. And you go back to your girl, your little angel. She's almost a year old.

Christine: Almost, we're getting there.

Dr. Klinghardt: Two more weeks to go, yeah.

Christine: Well, thank you.

Dr. Klinghardt: Thanks, Christine.



Resolving Trauma with Bioenergetics

Niki Gratrix, BA, Dip ION, NANP

Dr. Schaffner: I'm here with Niki Gratrix, and we're going to talk about using energy medicine to resolve emotional trauma. Niki is an award winning functional nutrition practitioner and transformation coach, helping people to optimize energy. In 2005, she co founded one of the largest mind-body clinics and integrated medicine in the UK. The results with the patients at the clinic were published as a preliminary study in 2012 in the British Medical Journal. And in August 2015, she hosted the largest ever free online health summit on overcoming fatigue interviewing 29 world experts on optimizing energy with over 30,000 attendees. Since 2015, she's spoken on over 40 large online health summits reaching over a million people worldwide.

Niki, I'm so grateful for you to be here on the summit. I listened to many of your interviews and I think the work you're doing is great. And I really just want to get the word out on how our emotional terrain and our emotional story, and our past history and trauma really can shape our physical and energetic body. And so let's just dive in and talk about your work, and how you really learned that emotional trauma is so important to address when recovering someone's health.

Niki: Yeah. So thank you so much for having me. It's great to do this summit with Dr. Klinghardt, and I've got huge amount of respect for as well. I love your work as well. So on such an important

topic that you're doing as well. So yes, the whole emotional trauma piece and emotions and stress, and this mind body connection. It's so underexposed, I'd say. And it's so important. And it has such a profound impact on our biochemistry, on our neurology and on our energy field. It's the difference to whether someone can recover from a chronic illness or not. So if we miss that piece we're missing -- For many people, you may be missing a critical part of the jigsaw of recovery.

And most people need this multifactorial approach. We're not throwing out the biochemistry or forgetting about functional medicine or anything like that. But this is a critical piece. And I think that most people, they still dramatically underestimate how prevalent it is. Because it's almost so prevalent that we can't see it, because we're surrounded by it, and we're just in it. And we sort of we act it out. We're living it rather than being aware that we might be coming from a place of emotional trauma and that it could also have changed our biochemistry and created illness. And there are certain studies I always reference because it helps people get an idea about just how prevalent it is. There are a couple of distinctions; we're going to talk about emotional trauma.

Most people think of emotional trauma as qualifying for something called PTSD; Post Traumatic Stress Disorder. And so that the general population to kind of associate with that big, big



Trauma, it's called. Things like maybe being in a car accident or maybe being hospitalized for something which can be very traumatizing, especially for children. You know, war veterans go to war, hugely traumatizing and then sort of developing PTSD in response to those things.

Now, that's big, and those will have a massive impact on us and I'm not downplaying them. But the majority of trauma is not -- I call it does not qualify for PTSD. The vast majority of trauma and emotional stress comes from something called developmental trauma, which means it happened before the age of 18. And it's almost always what we call relational or social trauma, which means it came out of our relations with our key caregivers, could be an authority figure, as well.

The interesting thing is the researchers have found, if you have developmental trauma, you're much more likely to develop PTSD in response to discrete events in adulthood. Okay? So what they found is, for example, the soldiers who go to war, and the ones that come back with PTSD that have trauma response to a discrete event. It's often a single event, could have been an assault, could be like I mentioned, like a Carsten. The group that developed PTSD are the ones who had developmental trauma. And developmental trauma is all about your attachment relations. And this is where it gets it's much more of a blurred line about what developmental trauma is. A lot of people can look back in their childhood and say, "Well, I wasn't hospitalized. There was nothing that really happened." But they might not realize they had emotional neglect. And emotional neglect is something -- it's not what happened, is what didn't happen.

So people can't self report that either, but they're

the ones risk when bad things do happen, which inevitably they do, it's part of life, they're more likely to develop PTSD. So this is where I'll just share some of the data so people get the idea about prevalence and the impact on health. Developmental trauma was studied a lot of it by a study called The Adverse Childhood Event Study. And it was a huge study by the CDC and Kaiser Permanente back in the 1990s.

Over 17 and a half thousand adults were surveyed. And they were asked about things like, did your parents separate or divorce? Did you experience physical, sexual or emotional abuse? Did you experience physical or emotional neglect? Was there mental illness in the family? Was there substance abuse, all these kinds of relational aspects? Okay. So first of all, 67% said yes. And probably that was that's low because people didn't know to start with; would you asked, like, do you have emotional trauma in childhood? You know, how many people could actually say yes. How would you know you know? How would you know how you should have been brought up, that's part of the issue?

So this is hugely prevalent, and here's the key things takeaway; of those people -- if you had a high level of ACEs, Adverse Childhood Events, you have a dramatic increased risk of seven out of the top 10 causes of death. If you had just four ACEs, you have a 400% chance of developing things in adulthood like depression, over 400% chance of developing Alzheimer's dementia or the brain sort of elements that are becoming more and more prevalent.

If you have -- I got into this is if you have a high level of ACEs, you had a six fold increased risk of chronic fatigue syndrome and fibromyalgia, and



those kinds of illnesses. Just two ACEs is 100% increase risk of autoimmunity in adulthood. And also if you had like eight ACEs, you have three times the risk of lung disease, a lung cancer and three and a half times risk of heart disease. The top two killers in the west.

So that is the data that everyone should know about, that fundamentally confirms that you cannot not consider your emotional well being and your upbringing, the more likely that you -- Unfortunately, you know, childhood is when we are the most imprintable. So that's when things get set up. It sets up our stress responses in adulthood, which why I put so much emphasis on it. But that's the date, which really kind of brings it home to people, helps people understand. Six ACEs, you have a 20 year reduction in lifespan. That was the ACEs study.

Dr. Schaffner: Wow. Every time I hear this just -- you know, brings this information. And it's just so important to get this information out. And so you mentioned a few things. I just want to make sure that if people are kind of thinking, "Oh, maybe I need to look at this a little bit more. I've been struggling with my health and I'm not getting better and maybe this is the missing piece." Can people take a score on their own or do they need to actually do that with a practitioner who can help them, guide them through that score?

Niki: It's a good question. I think people can start that. It is good to do that to just start with it. On my website, I have what we called an extended score, which is sort of taken some of the work from Professor Bessel van der Kolk, who's kind of the world's leading expert on trauma. He's the guy pushing out that we all need to learn about developmental trauma and how it's different from

PTSD. And because the questions are superficial, you know, the ACEs study was a great study. It was an important study, it was a landmark study. But the questions are quite superficial.

But for many, at least, that starts the journey. The extended version I did is asks a little bit more difficult questions, which can be a little bit more upsetting for some people and in that society, and if it's kind of touching you in that way. But it's more like when bad things happen to you as a child, what they do to everybody who was there for you to take care of you. Who was there socially connecting with you and to make you feel okay when things happened.

So you know, who got you up in the morning? Who could you talk to when things went wrong when you were feeling bad? So it's kind of the more subtle questions. So it's just start with doing a nice questionnaire but know that there's an extended version. You can go to Bessel van der Kolk's website as well or mine, and see the some of the deeper questions as well. And there's a lot more we can talk about. I mean, emotional neglect. I mentioned that one. It's just that's so epidemic. I mean, we are living in a time -- we talked about the standard American diet. I think the standard emotional diet -- you know, the standard American diet is awful statistics, the sad diet. The standard emotional diet, for most people is 100 times worse. And these toxic emotions is unresolved trauma, this lack of self love that we're all carrying around with us without realizing it is speaking to our cells and our cells listening. And this is changing our biology, it's switching enzymes off. It's doing all kinds of things, this kind of screw up happening in the biology.

So yeah. I think, starting to become aware about your emotional state. That's the other



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key piece as well about mindfulness. We'll talk about that a lot more. The emotional neglect, we don't pay attention to it. We live in a society that overestimates the intellect at the price of emotional well being. There is a book called *Running on Empty* by Dr. Jonice Webb. Everyone I recommend that book to they just go OMG. It really has a big questionnaire in that as well. It's another book that I recommend people look into, because it's still the way of getting to this more subtle type of trauma that you might not have realized you experience. So there are quite a few resources that I could recommend on that level as well. But yeah, that's another good one.

Dr Schaffner: And so you already kind of touch on our biography or our life experience in this trauma really become our biology. And there's a lot of science that shows us it's not a theory, it's actual science at this point. And so I really want to make sure people understand that connection. And as you're describing that too, I think it's important to also understand where these memories are stored in the body. And you mentioned in the book, the body keeps the score. I always just use that as just even the title alone when I'm talking to my patients, because it gives us that kind of understanding and it kind of just resonates with patients. That makes sense that you know, our memories and our trauma are stored in our cells and our tissues. And we might not remember something but our body does, and can you just talk about some more?

Niki: Yeah. So that's a really good point. The time doesn't heal, it tends to congeal. So you might not remember you had trauma but your body does remember. The body keeps the score. It's exactly the book title by Professor Van der Kolk. So when we have this early life stress, the risk -- obviously

that ACEs study was huge, and it triggered a lot of research. And what they found is that this early life stress, whether it comes from neglect, or whichever one of those things I mentioned, has a profound impact on the entire biology at the biochemistry level. So it will change the entire genome, the epigenetic expression of the entire genome.

Originally, the early researchers found that it was the glucocorticoid expression. So it was like oh, the way the body responds to stress. And that was all in the mainstream research, absolutely changes the epigenetic expression of the glucocorticoid receptors in the brain, meaning you basically need much less of a stress to have a stress response. So you're going to be marinating in higher levels cortisol and inflammation and cytokines and all these kinds of things through a lifetime from the date the trauma started. Your genetic expression has shifted. So you're much more -- you've sort of become more wired for stress and more easily triggered. So they started with that one genetic expression change.

But of course, it's never one thing. The research is always looking for one gene so they can find one drug. But no, the researchers came back and said, "No, it's the entire genome." Everything that links across all factors, hormone expression, and association with psychiatric disorders. And immune system skews, across the board, increasing your risk of health issues, whether it was cancer, heart disease, or all the sort of top seven to eight illnesses are most common. So that was the one impact.

We also know we do have almost probably 30 years of the science of psycho neuro immunology now, which is that multi disciplinary mainstream study



of psychology, neurology, the immune system and the endocrine system. And we know there's this profound connection between what's happening in your nervous system, the nervous system is perceiving whether we're safe or not. And how stressed we are.

The other side of the coin is the immune system will respond to what's happening in the nervous system. So absolutely, fundamentally, we know that when you're in a chronic state of stress because of maybe some trauma, you suppress the immune system on the one side, so we've come more prone to getting infections and so on. And on the other side, it also creates more inflammatory responses as a skewed effect. The changes in hormones. We also now know that it also triggers what we call the CDR; the Cell Danger Response. So now we know that stress also switches off our mitochondria, switches off the cell from functioning properly, so it's not doing its job of producing energy and detoxing. And things like the cell membranes get thicker and shut down.

The cell danger response is like London during the Blitz in the Second World War, like, go into protection mode, is defense mode. So we've sort of -- it's an expansion of understanding the stress response where everybody used to just think the fight flight response. Now we know it's a genome, everything and the cellular response. The stress response is much bigger than just talking about cortisol, for example. So that's kind of a bit of a summary of what's happening at the biochemistry level. But then there's also the neurology and it's interesting that a lot of psychologists actually think that trauma and memories, sort of it's in the nervous system. So I'm like, okay, if we cut up the neuron, and search for the memory, you won't find it. I promise you won't find it. But there's light

with the biochemistry, trauma leaves an imprint. So it definitely is changed the -- so for one thing, if we are in that chronic state of stress, we build new neural pathways in the brain, which will wire us. We have a brain wired for more of a stress response.

It's like we're stuck more in that reptilian kind of acting out immediate response of stress, rather than having a kind of calm, relaxed state of being. So we get stuck more in this kind of sympathetic stress response, or the response to trauma, we can go into collapse mode, which is like the free state, as well. So the neurological impact is profound as well. So the nervous system is changing, the biochemistry is changed.

But the most interesting thing is the actual memories themselves, like they're not in the neurons. So where are they stored? And what's very interesting is there's kind of leading neurologists and the latest theory is suggesting that the memories are probably stored in the electromagnetic field created by all the neurons firing together in the brain. So this is where we get into physics and biophysics in energy medicine because we want to --

When we start thinking about correcting and healing trauma, we will need a multi layered approach. So we want to correct what's happened to the biochemistry, we want to help stimulate the right part of the vagus nerve and start rebalancing the brain and the nervous system. But we also need to release this trauma memory from the energy field.

And it's so interesting on this biophysics summit that if we look at the frontline conventional intervention for trauma for PTSD, as well, is something called EMDR, which is Eye Movement



Desensitization and Reprocessing. That's conventional frontline treatment. And it's really based in the idea that we have meridians and sort of the traditional Chinese medicine kind of principles, the same as Emotional Freedom Technique, or it's this mental field therapy, whichever you want to call it, these energy psychologists. So these energetic interventions, we could talk about more of those types of things, are some of the most profound.

I have a technique I use called Matrix Re imprinting. So it's not only do we release -- EFT and MFT and things like that will release the stress related to those memories. But we can also re imprint the memory to imagination as well. So we want to work at all levels to heal trauma. And really I think the root cause of trauma is at the energetic level. So if you can clean up the biochemistry, you can rebalance the nervous system. But if you don't address the energetic level, it won't clear complete completely, or you may not be able to hear it at all, or the things you do on the neurology and the biochemistry won't last. You'll get some improvement and you'll go back again. We'll go backwards again. So it's very interesting topic.

Dr. Schaffner: Absolutely. And you know, we've seen that in our practice as well. You could give people the supplements all day long and if we don't address these things, the body may be stuck in a holding pattern or not be eliminating properly. Once we kind of address the trauma piece, the body starts to move and things start to flow, if you will. And so you know this is just fascinating to hear. And also on that, and many people might have gone through talk therapy, and well, that is absolutely an important part of the healing process. It might not always heal or help people really recover and really heal on the profound level

that they want. They still kind of keep cycling in that pattern.

And so, to break down some of all these fascinating things that you're talking about, Niki. You mentioned one thing that just fascinates me how they found that trauma or these memories can be held in the electromagnetic field of the nervous system. And can you just share a little bit more about how that was discovered or how they even measure that, or bring that to life or break that out of someone's just like, Oh my gosh, what does that mean?

Niki: So it was called Karl Pribram, I believe. He was -- I think was a German neurologist, a very highly qualified individual, highly respected. And he was the one who first theorized. He theorized and said, "Well, the memories just they're not in the neurons. We can't find them anywhere. No one's found them." So he's the one who first said that. And what's very interesting -- I wish I'd got the paper reference now, there are papers coming out. There was a recent one that was super where they literally found that the brain -- they were so shocked; they said, the brain is communicating wirelessly. We chopped a neuron in half and like the communication carried on. I have to maybe send you that reference and you'd include it in the link below. It was a brilliant paper. It was mainstream published paper and it kind of hit a lot of the science publication journals. And so it's absolutely what was first we thought as a theory, mean it's not in the neuron. So you know, we can't say it's anywhere.

So that was the best theory we have. Now, the empirical research by mainstream researchers is proving that this is true, that we have -- Imagine a kind of it's like a wireless network that's



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instantaneously communicating. And it's not going across neurons, it's actually communicating, probably at -- yes, even beyond maybe information rather than even electricity. So it's informational communication happening.

And you know, this would make sense with what we've always known about with Chinese medicine and the type of you know, the meridian communication. If you can conceptualize and think about how meridians are sending information across the entire body through communication, like a fourth circulatory system. The energy fields of the meridians are kind of sending information that tells the biology what to do; is actually a control level, it's almost like a blueprint.

And the DNA itself is not enough. This information from the field is actually the master controller to tell the DNA. The DNA is just like a library that has all the pieces in it, and it has the blueprints, but it's looking to the energy fields, like what do you want us to produce here. And then the energy field tells that to the DNA, the DNA gives the blueprint and the protein start to be produced.

So you grow things and repair things, or whatever it may be. So this energy field I think it's the ultimate root cause of the most -- root level that you can work out. And yeah, it's absolutely fascinating. It kind of backs up what so many of the kind of subtle energy field, energy medicine people have been saying for years. And so yeah, we'll share that paper as well, where the mainstream researchers are going, wow. And it's like, yes, we all knew that. We all know that right. We were just waiting for them to catch up. It's always the way but they are doing, so yeah.

So consider that like a wireless communication

going on that is not dependent even on the physical neurons, which is amazing.

Dr. Schaffner: And that's a common theme that a lot of speakers have been talking about; how the field informs our biochemistry. And so that just kind of turns everything around of how we look at medicine and healing in the body. And I think it's also a really unique point with what you're saying about the brain, because many people who might have anxiety and depression. And, you know, these outcomes are symptoms of trauma and all sorts of things.

You know, conventional medicine wants to treat the neuro transmitters and the neurons communicating in that way. And what you're saying is that, that seems very limited and really addressing at the root of what's happening in the brain.

Niki: Well, yes. And that's so interesting, because -- you know, the one hand there's a place for it. There's a time where we do want to work at the biochemical level, but we also some of the best treats like pulsed electromagnetic frequency is a brilliant -- turning out to be a great sort of electromagnetic intervention that's happened. For example, reversing and treating treatment resistant depression. So that speaks straight to the idea that it's this field, that we can change things at the field.

And in EMDR where we're just moving our eyes and sort of breaking energetic patterns, and then the person heals, that's the proofs in the pudding that these things are actually working. You just changing the electromagnetic fields, changing the waves, and that's changing the biochemistry. So there's still a place for working at the biochemical level, but some of these sorts of electromagnetic level interventions are proving to be really profound. And



the energy field is so where the mind and body that you -- everything's made of energy.

So that's the place where all that -- we've heard so much about mind body. But now we know that this field is what kind of brings the mind body together. It has everything in that field race. It's the blueprint for the biology, but also all your thoughts and memories and how you're feeling and your history, including your intergenerational history, which we haven't mentioned that as well. But the whole intergenerational trauma that we don't just inherit the genes of our parents, we also will be inheriting the imprint on the energy field. So we pick up the imprint on that energy field as well. So it's another source of how we can be expressing symptoms of anxiety, depression or trauma and kind of look back in our own childhood -- exactly explains that. What about your parents? What about your grandparents.

So that's another thing to consider when people start assessing. Also consider your parents experience and your grandparents as well, because trauma really inter generationally inherited. And the Holocaust victims and some of those studies have shown that as well, which is another whole area, isn't it? Yeah, so it's kind of key, consider that as well.

Dr. Schaffner: Yeah. I'm glad you mentioned. Dr. Klinghardt does family constellation work which is another tool that just really acknowledges that you know, unresolved trauma passed out from generations and affects our epigenetic expression. So I definitely think that's really relevant to just share with people.

And again one of the exercises in that work is creating a genogram looking kind of three

generations in your history. And just noticing you know, what comes up, have people been divorced, whether they're part of the Holocaust, was their suicide. You know, all of these things and that could be a factor in your health and in your body. So I'm glad you're sharing that on, Niki. So you mentioned kind of your own tool. Did I get it right; Matrix Re patterning or?

Niki: Matrix Re imprinting.

Dr. Schaffner: So can you just share what that really looks, like on level, what you're doing with people when you're going through that system.

Niki: Yeah, that's an interesting energy psychology process. It's something that was based originally on EFT; the Emotional Freedom Technique. And it to me, it was like a bit of the missing piece because a lot of these things like EMDR, EFT, and so on; what you're doing is you're taking the trauma out of a particular memory.

So it certainly calms that side of things down. But you still got what I call the attractor field, you still got the memory imprint there. And so you can still start attracting into your life, you know, maybe negative people because there's trauma that may have caused lack of self love. You've got a self love deficit, so you keep attracting people who don't treat you well, for example. So if the memory is still there, it still can be causing some havoc. So we not only want to take the stress out of it -- that will be EFT in that level, but how about like taking that route out and actually really re imprinting it.

The way you do that is you actually use imagination. And you would work one on one with somebody and take them back; it's often back to the original incident that was traumatic. It's also



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happening in other Western psychology, they don't call it matrix re imprinting but they're calling it something else. It always happens in psychology, doesn't it? Everyone is kind of doing the same thing and calling it something slightly different. But it's really powerful to say for example, go back to an early incident. And actually imagine the process of you getting completion or getting into a safe space or pushing the person back who might have been doing something to you that was traumatic.

So through imagination you go back. You might have been a child, maybe where they were being treated too harshly. And you can actually go back, you connect with the child self through the imagination. And you ask the child because you're going to connect that part of you, a bit like parts therapy as well.

And you ask the child what would the child want to do in this situation because now you've got unlimited potential because you're in your imagination. And it's really profound. I love matrix re imprinting. So you can actually get completions in sense the child might want to certainly bring in a protector and so they can't be hurt or say stop or can be taken out of the situation. So what happens is you actually are re imprinting and changing sort of what happened in the past. And if we think about maybe time doesn't exist anyway, you're actually healing the past, never too late to have a happy childhood.

That's the idea behind matrix re imprinting. So yeah, to me, that's the next level. I'm seeing other like attachment therapists have been using a similar kind of process where they actually do take people back and they bring in a support person to help them through imagination. And the support person is there in the situation that may be very

traumatic, is many different things and tools that you could use, but that's just a tool that been really great. I love that. I can see other people bringing that one in as well. But yeah, that's just one of quite a few different things that you can use.

Dr. Schaffner: I know that's fascinating and it's amazing. And I think that's a great point. It's empowering. And even though we have this past that is traumatic, we could rewrite the story and change your response, you know, to what we've experienced. So that's fascinating, and I think that's really empowering. Niki, what other tools do you use on this kind of more energetic level when you're working with people or have worked with people in the past to help heal them?

Niki: Yes. So there's a whole range of things. One thing I wanted to mention because it's quite practical and accessible is you can't talk about trauma without stimulating the vagus nerve, like talking about the vagus nerve. The vagus nerve is so important; the nerve of compassion, the nerve of social connection. That is the parasympathetic side of your nervous system. And if we talk about a particular part which is what we call the ventral vagus nerve, that's the rest to digest, detoxify side. And when we stimulate that, amazing things happen. They've electrically stimulated the vagus nerve and within eight weeks of curing people with severe autoimmunity. So the vagus nerve has got a whole lot more that it does than we realize. It's the switch that switches off inflammation.

So when we stimulate the vagus nerve it's having this profound biological effect. It heals the gut. It makes sure the tight junctions between the gut cells are nice and healed and so on. And interestingly, when you have a high vagal tone. And it has been proven in the literatures in the



mainstream research it's associated with being in an uplifted emotional state. So when we do things like gratitude journaling, or loving kindness meditation, they've scientifically proven that increases the vagal tone, means the vagus nerve is more stimulated. And we also we know this is where the mind hits the body. You know, this is where the rubber hits the road with mind body medicine, because when we do those things to stimulate the vagus nerve, we now know that also does things like switch off inflammation, heals the gut and all the other things that this vagus nerve does.

So it's sort of foundational that we want to be doing things on a daily basis as part of a lifestyle design protocol to stimulate our vagus nerves. And the good news is there's lots of ways to stimulate the vagus nerve. So anything which you look in the science, which raise what's called heart rate variability; HRV. There are so many studies. I've mentioned a few meditation, deep breathing, Tai Chi, yoga, fasting. There's some other things like that; green vegetable juices, always heart rate variability, essential oils are fantastic. All of these things one way or the other are used to sort of help people raise their heart rate variability.

And you want to be doing these on a daily basis so that you can create what I call like a miracle morning. And I choose like maybe four things that you do in the morning that will just put you in that space. So you might do if you only got five minutes, then just do those things for a minute. So maybe you're doing some meditation, maybe you do a bit of stretching and yoga, maybe you do a bit of breathing exercises, and then maybe you do some gratitude journaling.

And so you're setting the tone for the day. So these

are part of lifestyle that I get everybody -- this is what I would want everybody who's got kind of suffering because of trauma to start doing on a daily basis. And it's something we all need to do for life; is like sort of eating vegetables. Like, how long should I eat vegetables to be healthy? Forever, the rest of your life. Well, that's like vagus nerve stimulation as well.

And there are some interesting sort of machines and electrical devices that are coming out to watch out for. There was actually one that's called the PONS device. And *The Brain That Changes Itself* was, in fact, bestselling book by Dr. Norman Doidge, he's a hero of mine. Those books of his are fantastic. He talks about that device which does actually -- it's the device that you put on the tongue and it stimulates the vagus.

Now the only thing is that probably it's awaiting FDA approval, I think. And it might be prescription only, but know that you have about 40 different ways of stimulating the vagus nerve. Did I mention for intermittent fasting, cold showers, exercise, all of these things. so they need to be brought in on a daily basis. I will just mention circadian rhythm management as well, just because it impacts so much and it's part of this lifestyle design.

I spent a lot of time working with people on lifestyle design because it's simple things. If you've got some kind of illness, if you've got health issues, you know go to bed at nine to 9:30. Be disciplined go to bed early, don't eat three hours before bed. These are all signals to the clock genes that are saying; is it night or day? And that information goes into the brain. And then the brain switches on or off all the hormones on a clock time basis. And it's taking signals from the environment about timing.



And it's time that you eat, your activity. There's temperatures also a factor but sunlight is the one of the biggest. So that's why you kind of getting the blue blocking glasses, get the screens out. And if people just did circadian rhythm management, vagus nerve stimulation every day, and made sure they have a diet that is managing blood sugar. Those things, you can eliminate so much anxiety and depression just by bringing in those kinds of foundation things.

And these are the -- they may sound basic, but they're the pillars upon which you build the other things that you do. So these are the foundation lifestyle factors, which practically and hopefully people who have taken some of them -- if people actually did what I just said for 30 days, they would be different people, but they're not doing it right now. So just to help people that there's some practical things you could do, doesn't cost anything either.

So start with that. And then you could build the more targeted support on top of that too, but you need the foundations in place. And that's where some of the other tools that I use; I mentioned matrix imprinting, kind of EFT I use that a lot. I do some process of neuro linguistic programming, a stop process NLP. That's for when there's a lot of anxiety and the amygdala is really over sensitized. And we might be having chronic stress responses to maybe our own health, maybe to our own symptoms. So I do teach that a lot. It's for people who've kind of in a state of limbic kindling, like they're having a trauma response to being ill. And that's part of the picture what's going on with chronic fatigue, for example, chronic fatigue syndrome.

So that's another tool. And I was going to mention

in terms of different tools. I mentioned PEMF devices as well, like Pulsed Electromagnetic Frequency. I've got a video of just using a PEMF devices with a million dollar bull that is completely angered, turned crazy. And they just hold the PEMF device a few inches away from its forehead within minutes, 30 seconds the bull is calmed down. It's a proof that it's pulsed electromagnetic frequency. You know, our emotional state is in the field.

So that's important too. And that's the type of homeopathic type remedies; they are worth also talking about, because they also impact the emotional field. They're one of the few things in water, if you like that, you can take. This is fascinating. So the research about -- I should have mentioned this at the beginning about where memories are stored. I'm almost 100% certainly the other place that memories are stored is in the water in our body. Because there is so much more to water than we all thought.

And it looks like the electromagnetic and magnetic information can definitely get stored on water. So this is also -- we store our emotional states and emotional inflammation in water. And what's very interesting is you've got this plant medicine movement happening around things like Ayahuasca. And there's research going on all that. Bessel Van der Kolk recently, he was talking about ecstasy and he's researching that. You know, so I'm not saying it to be out there.

One of the things that the shamans have said for thousands of years with Ayahuasca, for example, and some of my friends who are learning with the shamans right now; the shamans will tell you that when people do these ceremonies and they take this plant medicine, they have an emotional release. And they feel they're completely



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emotionally different afterwards. They can heal things like PTSD. The shamans are saying that the release is happening.

What happens in Ayahuasca is you purge, so you vomit. A lot of people, you'll get loose stools, you'll urinate. And the shamans have said, it's through that release of the water where the toxic emotions are stored. So they're saying that the music actually triggers the shaking up of the cells. The music is very important in the ceremony, and then the release is actually the release of water.

So that is why I do think the other fascinating thing about what we've always thought about homeopathy is that it impacts the emotional body. You can be emotionally different from homeopathy. And that's why we've got Harry Massey on the summit, and he's using his NES, Nutrient Energetic Systems, which is sort of a bit like the next generation of homeopathy. It's not quite the same as homeopathy, but it's still information imprinted on water.

And I definitely use those two, so you could take what -- he calls them infoceuticals. He created the name infoceuticals. And they're just like little bottles of water that have been imprinted with information that you just take the drops, and they enter the entire field of your body through the water and the energy field. And imprinting was giving the body new information that will cause a release of old negative beliefs, imbalanced emotions as well. So the water piece is good.

I'm glad I remembered that, that's like a key thing about where memories and stuff is stored. I think it's been a revelation to me to learn about that and then find a confirmation through ancient plant medicine practices as well, how fascinating.

And that's the other reason why I use that system. And sometimes people just have very intense dreams and memories coming up when they're taking infoceuticals. And you just have to coach them through the fact they just really things -- that they're wrong. Don't have to worry about anything, just be with it and let it go. Let what comes up come up.

So yes, and sometimes we might add in something as well. So if someone needs a little bit of extra help to release something, because maybe in-pursuit calls stirred it all up, or maybe an old memory came back and then we might bring in a tool. But sometimes people just doing infoceuticals will have an emotional release just like that, or just clear things through that for no reason they'll feel depressed one day or they'll feel sad or they'll feel like crying. And it doesn't have to be negative emotions either. Sometimes it's other things or just memories from the past will come up and they're just clearing through. It's just emotional release. So that's sort of I think a really important and fascinating area for healing trauma as well.

Dr. Schaffner: Well, absolutely. And we have a few speakers talking about water; and everything from Gerald Pollack talking about exclusion, some water. And this whole idea of deuterium depleted water and hydrogen water. And Jason Prall actually, he talked a little bit about plant medicine and, you know, the sound and the healing that happens. And he talked a lot about his personal experience with kind of this release of toxicity in his body and how that helps him. And so we're all interconnected. And you know I see it in the office, as we've shared in -- Dr. Klinghardt has kind of a framework he calls it The Klinghardt axiom. He says for every amount of unresolved trauma, there's a stored amount of toxicity in the body. So



as you remove trauma, you remove toxins out of the body. And as you remove toxins, you need to remove trauma. You know, it's this whole inner connection.

And so really it's always been when we are all doing this from different perspectives, but coming up with the same information. You know, our clients and our patients are teaching us every day.

Niki: Yes, that's absolutely fascinating. That Klinghardt's axiom, I've lived with that. And it's a long time, I had a huge impact what he said it was spot on. And it was so good also where he says, this is also useful for people to know. Like, sometimes you'll go so far in the biochemistry that you're doing and maybe just hitting a wall, it's not going anywhere. Change modality, go and try some energy medicine, or maybe do something at the nervous system level.

And then come back to the biochemistry and you might find that it opens and it works again. And so you sort of -- a lot of it is about being in tune with your own body, listening to your own body and following HQ. And yeah, I think that's really key because people go well -- there isn't a fixed protocol. There isn't a fixed protocol for clients. There's only what their body is communicating at the time and the direction that we go if we're listening and tuning into the body.

So yeah, it absolutely fascinating, but the cutting edge we're talking about solutions out there, and making a big difference to people. That's so good that you've got press job. John Paul I call as well, is so good. So yeah connects with everybody, Jason also. In fact it was Jason who told me about the high risk in the water release

Dr. Schaffner: Absolutely. Niki, you're just such a wealth of knowledge. I could pick your brain all day. Is there anything else that you're like really excited about or something that you're really exploring on your own in your own work right now that you want to share with us?

Niki: I'll just give a last shout out to -- maybe Jason touched on this little bit as well, but music and sound therapy. I think he's going to be tremendous in the future as well. It's catching on now. But I think it's a modality that again, has been sort of underexposed. I create a lot of meditations to help my clients as well. And I always put it in the music's critical. The music is working on so many levels that we probably haven't fully investigated yet or realize, but you know, it's totally frequency. Medicine is totally to do with waves and the electromagnetic level again, and we are at our core electromagnetic being. So it's like Pandora's Box. We've got all these amazing things where we need to move beyond the biochemical only paradigm. And you know, we were sort of fighting the pharmaceutical kind of predominance and all that, and they're going to try and poo poo everything.

So I've got clients right now who want to become health coaches, and they're thinking, should I go down the energy route? Or should I go into functional medicine? I'm like, I love the energy side. I think it's the future of medicine. I think it will be and it's gone beyond its usefulness in terms of how much further we can really go with biochemistry. We've gone probably as far as we're going to get. I think the major breakthroughs are going to come through -- is to look to the energy side, whether it's sound, light, electromagnetic frequencies, energy field and the intuition and our own consciousness. That's the last piece you could say like, probably bet there's nothing more



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powerful than your own consciousness, like the consciousness of the human. The body knows how to heal itself, the power of human intention.

I think that's all what I always come back to, your consciousness itself, which is not anything. And your thoughts and beliefs have this profound impact on the biology. So yeah, you actually have your biggest tool with inside you right now, which is your own awareness, consciousness and intention, and positive visualization and belief that you can heal. Let's not forget that because that's all electromagnetic actually is as well, isn't it? As energy medicine again, but I think that is my thing I'm most excited about, actually.

Dr. Schaffner: There you go. Absolutely. I know this is just such an exciting time. And I'm totally on the same page with you. And I think that -- I feel these tools, everything you just mentioned, a lot of people can feel a physical effect that they feel, chip in their body quite quickly. And it kind of defies sometimes the slowness that biochemical interventions need to take and to work in you know, many of our clients.

And I'm sure both of us seeing people, we've seen a lot of people who've been sick for a long time. And these types of modalities can speed up the healing process. And you know, what more do we want for people than that, right?

Niki: Yes, absolutely. And thank you for doing the summit on this topic, which really help educate people about what's available, because it's awesome.

Dr. Schaffner: Well, thank you so much for being on the summit. I'm just so grateful for your time and connecting with you. And Niki, how can people work with you or learn from you? Where do they find out more about you?

Niki: Yes, people can come to my website, that's the best place which is nikigratrix.com. And yeah, I've got some free beers and interesting material on there. So there is actually an A school that you can do. And I've got the extended one if people want to use that. Actually I do run an online course, which I'm just about to launch.

And I think by the time this summit is out, there will be a free master class training that people just go and to have full videos and kind of learn the basics. Actually, some of the things I mentioned about vagus nerve stimulation, circadian rhythm, blood sugar control, this kind of thing. So go and check out and see what will be up there when this summit comes out. That's my website. There should be some freebies and interesting stuff on there.

Dr. Schaffner: Great. Well, thank you for all the work that you're putting out into the world, Niki. And it's just a pleasure to get to know you more today. So thank you.

Niki: Thank you, too. Thanks so much for having me.



Re-Emergence of the Energy Body

Donna Eden & David Feinstein

Christine: Welcome, everyone. I am here with Donna Eden and David Feinstein and we are going to be talking about the reemergence of the energy body. Donna Eden is among the world's most sought out, most joyous, and most authoritative spokespersons for energy medicine. Her best-selling book, *Energy Medicine*, is available in 20 languages, and it's won golds in the *USA Book News* and *Nautilus Competitions* and it's the textbook in hundreds of healing classes.

David Feinstein is a clinical psychologist and is a pioneer in developing innovative therapeutic approaches leading to nine national awards for his books on consciousness and healing. He has served on the faculty of the Johns Hopkins University School of Medicine and is a recipient of the Marquis Who's Who Lifetime Achievement Award.

Welcome, Donna and David. I am really honored that you chose to spend time to do this interview, and I don't think our interview series would be complete on the Body Electric if we didn't have the two of you on the summit. So, thank you so much for being here.

Donna: Thank you, thank you. We're really glad to be here.

Christine: Ahh, well, Donna, I have our book on my

office shelf and I refer to it over and over again in my practice. I absolutely acknowledge the energy body and the energy medicine, but you were ahead of your time of really bringing this topic to the public with your book. So, how did your journey lead to really your work with energy medicine?

Donna: Well, I got very sick. From the time I was 16 until 31, I had multiple sclerosis and I didn't walk much of the time, especially in the latter years. I had a heart attack at 27 because all my organs were breaking down. And I finally went to see five different specialists who told me they had nothing for me and that, because my organs were breaking down, I might want to consider finding a mother for my kids. It was like that. But in the fifth time, the fifth person I saw, I don't know, something struck me. I felt an amazing joy hit me. It was one of those real memorable moments and I knew I was going to heal myself.

Now, I've always really known energy. I don't remember a time that I didn't really know energy, but I'd never used it in the healing way. When I got home that day, I started just experimenting with my body. What energies could I get moving that weren't moving well. Could I move through some block in my body? That's really how it all began.

And I just kept working, and I got more and more excited because, in the beginning, what got healed



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was not my multiple sclerosis but my allergies, which I had so many allergies. I couldn't eat the foods that everybody else said and all the experts said was good for you, because I was allergic to them. I couldn't eat anything that grew out of the ground. It sort of paralyzed me. I didn't know what to do. So, working on energy, my body got more and more adaptable. It could adapt to things it couldn't adapt to anymore, or before, and I just got healthier and healthier and healthier.

And when I was feeling really strong and healthy, I just wanted to share it with everybody I knew. So, in 1977, I started by just grabbing anybody I could. They could come and learn this from me because I knew that it wasn't just about me. I knew that everybody could help themselves or heal themselves. Everybody could get better. It was a blessing we all should know. We should all know this.

Christine: It is such a beautiful and helpful story, especially a lot of our audience may be suffering from, I see a lot of, chronic complex illnesses and a diagnosis like MS can be obviously very defeating and heartbreaking and people don't always see that they can completely heal themselves from such a strong diagnosis. Walk us through, when you talk about energy medicine, we are obviously working with energy and the concepts that we obviously have our physical body but we have our energy body that communicates with energy and this is a big part of how our bodies can heal. So, can you just share your framework for looking at our energy body and how--?

Donna: I really do see energy as all there is. I know that even our physical bodies aren't really solid. There these weavings of energy all through us. Energy streams through us and circles in different

spiral like ways. I personally work very strongly with nine different energy systems. So, I work with chakras that spiral and spin and really carry your life story as an encyclopedia of who you are. So, every one of your chakras is very different from anybody else's. It is very personal to you. So, you can find out an awful lot of what's going on in a person in their chakras.

Meridians stream like ribbons through your body and have different colors and different vitality and govern your organs. I work with radiant circuits. They are very important and often forgotten in our culture because people deal so much with stresses. All the stresses that they have to deal with. Well stress sort of squelches our radiant circuits. It is that natural joy, that natural wonder, and awe and sense of gratitude and gladness and happiness. It just bubbles up at us, out of us, that are often hidden for long periods when people are stressed.

So, how to access that. How to work with that stress which I work with a meridian called Triple Warmer that is also a radiant circuit and it governs that flight, fight, or freeze response. So, how to work with that. Well it will shift your whole body. It will change not just your mood in the present time, but it will really change how you respond to stress. So, it is very important.

I work with auras and the energies that circle us because they are the energies that really protect us. It is like our invisible space suit that allows us to be here on planet earth. And what else do I have?

David: [Inaudible]

Christine: No, when you speak, I immediately see this beautiful visualization that we are beyond our physical body that we see. We have this whole



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other aspect to ourselves. I really love how you share it is all interconnected. Our physical body is all energy, too. We can think of these things as separate. They are highly interconnected. So, if this is a new thought for someone who's listening, how can we start experiencing our energy and how can we start getting to know our energy? Obviously, when we are sick, there is an imbalance in these energies. So, how can we start having a dialogue with our energy?

Donna: There are several ways. One of the things that we do is we teach about a six-minute routine that we have people do everyday because it opens up all the fields and they start floating and then you really do start experiencing, "Oh my gawd, I feel so much better."

But each one of those, there are about seven exercises in that routine, and each one of them – some of them will unscramble your brain so that you can think better. Some will make your energy suddenly get vital and live. Some will suddenly help lift you out of stress and even depression. And all of these are exercises that I am very sure our ancient ancestors knew. They had to have known because, first of all, they've come down the pike to us and they work.

A lot of them we do instinctively without thinking about it, without thinking about it, like people throwing their hands up to their forehead and then take it away. When they put their hands up to their foreheads, if you would just leave it there, as our ancient ancestors must have done when they got too stressed out. They put their hands to their foreheads. Energy is electromagnetic. The blood in your brain and body are electromagnetic so if you align them, your hand will draw, like a magnet, the blood up into your forebrain again so you can think

again. It helps lift you out of stress. They begin to feel very so natural and why didn't I think of it before. That's how easy. It's very user friendly.

Christine: This is a completely different way from the current paradigm that we are working on shifting, that, if you headache, people think about taking an ibuprofen or even a natural supplement or so forth. The theme in this summit has been, if we actually work on energy body or energy field, these meridians and chakras and these circuits, that that actually has enough healing impact on our physical bodies.

So, it is this other way of looking at things. Do you have some other stories? I know that you teach around the world and you have been doing this work for decades. I know you have a long list of wonderful stories to share, but is there anything, any story that comes to mind to really illustrate how we can work on our energy body and that actually translates to healing our physical body?

Donna: Sure. But first I want to comment on what you just said.

Christine: Please, please.

Donna: I wanted to say that, you know, it is so beyond taking your pain away or even healing you. If you can get that, when you do these natural energy exercises, your body learns to work with you. You become a partner with your energies, and they start getting stronger and more flexible and more adaptable so that, as you age, you get better, you don't get worse. You don't start breaking down. Your body knows that its goal is to continue in that vein of getting you feeling better and better and better and it does it on its own more and more.



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Christine: I think that is so important, because, especially in the chronic illness world, there's a lot of what we call autoimmune illnesses. There's story and this thought that our body is working against us. Or if you have a significant condition that could be maybe, what comes to mind, and I think reshaping that dialogue that your body wants to heal and wants to work with you and that it's not something that you are trying to fight. I that's something that --

Donna: You know, having had multiple sclerosis, I really know that there is a tendency to think, "Why is my body doing this?" What I really came to learn was my body really needed to be loved. I started thanking it. Really having such gratitude that my legs could walk me, that my systems will do their thing, that everything would do what it was supposed to do. I was amazed and I realized in time that the reason why it appeared to be fighting me was because it had gotten confused.

When it got sick, it didn't know any longer, who was the enemy and what was wrong here and why is she doing what she is doing? We live in a world we never evolved for. The world we evolved for was the natural world, so suddenly we are ingesting and breathing in toxins and all the things our body was never evolved to deal with. I think we are much more prone to getting those autoimmune illnesses. We are also just as prone to lifting ourselves up out of it when we really get it.

Christine: It's creating this -- These are all techniques to increase our resilience to an ever-increasing stressful world. A lot of our speakers talk about even the health impacts of EMF and that's the cell phones and the wi-fi and all that and how that's affecting our physical body. Do you feel that that's been one of the biggest stressors, probably

in the last decade, that's changing how our bodies respond?

Donna: Oh yes! In the 90s, after having years of feeling like I healed myself and I was over that part of my life, I got really struck down by the EMFs. And I really got it. If I wasn't up out of bed by 3:00 in the morning, I couldn't get up. My arms wouldn't bend, my legs wouldn't bend. It was like energy from the earth would just come up and get me. We had somebody come over to the house and try to figure it out for me and he happened to have been -- what was he, David?

David: He worked for NASA. He was retired, but he was the one that figured out how to protect the astronauts because they were in that small enclosure with all the electromagnetic radiation. So, he was very good at that, and he thought Donna was his toughest case. She is so sensitive. It's part of who she is. It's part of her healing ability is that sensitivity, but it is also part of her vulnerability. It was quite a journey to watch.

When I came onto the scene with her, she was 34, so she was 31 when she started to -- when she had that fifth doctor experience and then she started work on herself. It took her two full years. It's not like this is an instant cure, touch this point and this point and you're better and you're over your MS. But it was a steady improvement. So, when she was 33, she was already pretty much over her symptoms of MS and I met her the next year. And it was very interesting because that is when she went into her profession.

I, as you mentioned, my first teaching position was at the Johns Hopkins School Medicine, so I didn't have a context for the energy she was talking about. It's like, probably most of your patients,



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I believe I have a body. Like Einstein said it's all energy = MC^2 . It feels like a body, so where does energy come into this. The simplest description, Donna says, "Well, if you don't have energy, you're dead. If you have energy, you're alive." So that's the kind test. Energy animates the body. Energy animates every organ.

And what the concept is, is not yet part of Western Medicine that is very important is that energy has intelligence. Energy knows how to tell an organ whether to turn on or turn off. Energy knows how to tell cells how to grow, how to go into an immune response. It is not just the chemistry; it is the electrochemistry. So, you have energy as another realm, and it is not a simple realm. Just like the body has all these very different organs, very different systems, cardiovascular etcetera, etcetera. What runs those is the energy.

With Donna's ability to see energy with her having really felt what it's like to be in a life-threatening situation with her passion to help others, she really figured out a lot about how to work with the energy body, with all those complex energies that are running all these complex systems in our physical body. I was there just kind of watching her develop this very comprehensive system. I don't know anyone else that really works in such an informed way about all nine different systems. That's part of what's so interesting.

Donna: It is complex, but, on the other hand, it is so simple. I mean all the easiest, simplest things are the things that just allow you to feel better and better. I do feel that everybody on the planet ought to learn it.

David: So long ago, Christine asked you to tell a story.

Donna: Oh, Ok. Yeah, she did. I have so many stories I could tell but a story that happened to me a long time ago. I had a full-time practice and a woman came to me with ovarian cancer and she was very scared, and she was going to have surgery soon. And there was suspicion it had already metastasized and, so, energetically I could see that it had. It had metastasized. One of the thrilling things is how much the body will respond. It will respond when you start moving the energy and so, I just did something very simple. I started working on the chakra in that area of her ovaries.

It is still thrilling to me, after all these years, how the body responds, and it just began to change and shift. And, I said, "Look, don't have the surgery yet. Let's see if we can work with it a little bit and see what can happen. You don't need to do it immediately." She went home and her husband was furious about it because he just thought I was some kind of quack. And he called me up and said she wouldn't be coming in for her next appointment. And I said, "Look you come, too. You come, too." And that's what happened, he came.

David: You said you weren't going to charge.

Donna: I said, "Just come. I won't charge you a dime. Just come." And he came and I taught him what to do. And he said, "Oh my gosh. I can feel this. I can feel it!" He got so excited. It is thrilling to see people who have not been turned on to energy to begin to feel it and that's what happened to him. Long story short, she didn't have to have her surgery. The husband worked on her every single day. And that's what I want people to know. You don't have to have some healer doing it. You can do it. Our body is made for this.

Christine: I love that. I know when people are

stuck and struggling, they're looking outside themselves a lot of the times for someone to give them the answers or to heal them. A lot of these are self-healing practices and tools that you teach. I know you were going to offer maybe some techniques to share with our audience today. Just some things to get started having a personal experience and, once you start having this connection, these esoteric ideas become very tangible and then people feel better and feel able to make them a practice. So, can you walk us through a technique today?

Donna: Yes, in fact I am going to use David to see what he needs here. Put your arm up real strong. OK, now I am just going to smash your nose. All that means is that there is an energy that runs up the front of the body called Central Meridian and Governing Meridian goes up the spine, goes over the head, over the forehead, over the nose and the two of those meridians connect up at the back of your throat and when they do, you are more protected. The energy then can spiral around you in both directions and it just holds everything together. It kind of weaves all the fields together.

So, what I am going to have David do is put 1 finger in your bellybutton and 1 finger at your thigh. And you do it, too. Push in and pull up. Push in and pull up and take a couple of deep breaths. OK. All right, David. Let me see. I am going to smash his nose again. The reason why I am smashing his nose is because the energy has stopped at his forehead. So, I am going to go, "Whaaaaap." Now, David he is real strong now.

David: So, it's not like that was a chronic condition. What happens to all of us as we go through the day – it's kind of the end of the day and it's been a long day for me – so the energies kind of get out of

alignment so that you have to really put them back into alignment. If you do that every day with a daily energy routine, it really keeps you humming. It is like keeping your car well-tuned. Tune into your body.

Christine: Just energetic hygiene.

Donna: Energetic hygiene.

Christine: Just like brushing our teeth, we need to pay attention to these energies. Well, David, you specialize in energy psychology, correct?

David: Yes.

Christine: Can you share with our audience really what does that even mean? And how does energy psychology fit into this whole world of energy medicine?

Donna David: We've been together for 42 years. For the first 19 years I didn't really understand what she did. I understood that people were coming from all over the world to get healed by her, but I didn't quite understand the energy part of it. Because I understood energy as, energy is the capacity to do work. It is electrical energy. I didn't understand energy that carries information and that has intelligence. That is the big difference in the subtle energies that she worked with. I just didn't get that. Then she asked me to help her write her book, so we spent two years with me interviewing her.

When I was at Hopkins, I had a similar assignment. The Chair of the Department asked me to look into the new therapies. So, I had interviewed a lot of people asking tough questions. When I asked her tough questions, she had comprehensible



answers. What she was doing was empirical. It was based on observation and experimentation. Donna would look at a person on her table, she would see where the energies weren't flowing. She would see where the energies were out of harmony with one another.

She would do something with her hands, with the electromagnetic energy of her hands. Did that fix it? No. OK, well maybe it's not the meridian, maybe it's the chakra. OK, I will work with the chakra. Did that fix it? No. Well maybe it's the meridian that feeds the meridian that's in trouble. Ah, that's where the block is. So, she would observe, experiment, observe. Now, granted she can see things I could not observe, but, still, she could demonstrate what she is seeing. So that was all very convincing to me. Then the book came out. We went on the road for a six-city tour.

Donna: Which we are still on.

David: 20 years later. So, we both gave up very comfortable practices in Ashland, Oregon, to sort of take this out into the world. And people who were coming to our workshop were talking about energy psychology and I'd never heard of it. Even though I understood now what she was doing, this just seemed so strange because it involved tapping on points on the body. And what does that have to do with psychotherapy? I didn't read anything about that in my graduate training.

So, one of the people at one of the workshops happened to be a psychologist. It was a weekend workshop, so Sunday night – her local psychology group got together once a month and it happened to be that night. And she invited me to come as her guest because they were demonstrating energy psychology. They were demonstrating tapping.

And the way it was set up was that a therapist who had been studying this, had been studying actually thought field therapy, the first kind of brand of this, was going to work with a client of another psychologist who was kind of stuck with the client. The client had a really severe claustrophobia her whole life. She couldn't be in enclosed spaces. She couldn't take an elevator. She was nervous about driving, going under a tunnel when she was driving. It was very disruptive to her life. She was a mother with two kids. She had gone through several therapists and no one had been able to help her. That was the set up.

So, I am there, and I am kind of pretty skeptical about this. At first, it was pretty comfortable for me because the therapist asked her questions that I might have asked about her about the history of it, what she tried to do to get help. Then he asked her to imagine being in a closed space and give a rating of 0-10 the amount of distress that it caused which I was familiar with that. That's a technique used not just in energy psychology but in a lot of different therapies, particularly systematic desensitization, which was what we were using.

So, that was comfortable but then he starts having her tap on these different points while she is saying phrases like, "My fear of elevators. My fear of elevators." And, I'm going, "Come on." After a round the therapist asked her to go imagine again being in the elevator and it's gone down a little bit. And I said, "Well, these things can fluctuate." It was 10 and now it's an 8. So, then another round and it went down further. I'm starting to say, "Well, what's going on here?"

Then another round and it has gone back up to a 10. And I said, "Ah, I knew it wouldn't work." After he said, "OK, well, it was a 10. Tell me exactly what

you were imagining.” And she said, “Oh. Well it was different. A memory came up,” which is often happens when you take the surface issues and reduce the charge on them.

The memory was when she was about 8 or 10 and she was playing with her brothers and a couple of their friends and they had a big appliance box and they would push one another. One would get in and everybody else would push it and that was fun. And, then when it was her turn to get in, they pushed it against a wall and there was only one side that had an opening and that was the side they pushed against the wall. And she couldn’t get out because her weight was there, so she was trapped. And they just left her. She didn’t know how long she was in there, but it felt like a long time. She was screaming and just exhausted. From that point on, she had this real fear of being in any kind of enclosed space. And then that just stayed right into adulthood as often happens.

So, I’m thinking, OK, well, something useful came from that. Now the original therapist that was working with her will spend a year talking about that and doing all the things the therapist [recommended]. He starts tapping on that memory, and you can do a round of tapping in one or two minutes. And what’s happening is you’re sending signals to the threat areas of the brain, to the amygdala, and the limbic system that reduce arousal. So, you’re keeping memory active, so that increases arousal but your tapping, so it reduces arousal.

So, as she’s tapping, the arousal goes down. Because you can do a round of tapping in 2-3 minutes, you can go a lot of different places. So, she was able to work with the terror. She was able to work with her fantasies of how she might die in

here and maybe no one is going to discover me. She was able to work with the resentment toward her brothers. All of these things are just being tapped away in front of my eyes, goes down, goes down, goes down. Once all those were cleared, then the therapist brought her back to the original thing of elevators and just a few rounds of tapping and that was clear as a 0.

So, that was something, oh wow. But we are all psychologists and psychologists like to test things. It was in somebody’s living room and there was a hall closet there, a coat closet. So, they suggested, what if you get into the coat closet. She was game and the therapist was very sensitive, he said don’t retraumatize yourself, if you get scared, just open the door and walk out. So, she gets in, the door closes and there’re a dozen psychologists all standing around the coat closet. About 5 minutes, I think, my subjective memory of it. It was a long time.

Finally, the therapist knocks on the door and says, “Are you OK?” She opens the door, and she comes out, and she is elated. She is just elated because she had never been able to do anything remotely like this and she is free of her phobia. Meanwhile, I’m sitting here going, “OK. I know what’s going on. This is a social psychology experiment.” It turned out it was really true. It really was the case.

And then I started getting training and had many similar experiences. And they last because what’s happening is when you send those signals to the amygdala when you are holding that stressful memory, it changes the wiring. It really changes the neural pathways so that there is permanent shift. That really changed the course of my career into this energy work and the relationship of energy psychology to Donna’s work is that Donna’s



work is much more comprehensive. She works with 9 energy systems. Energy psychology or tapping therapies, EFT and thought field therapy, emotional freedom therapy and thought field therapy, they work with the meridians and the acupuncture points, they just really work one system with tapping therapy, but they work with it really well, really precisely. There's a way to use language and combine it with the tapping that is effective in doing what cognitive therapists do but doing it faster.

So, that has really – that was about 18 years ago, and that has really shifted my whole direction as a psychologist. So, it's like the relationship of medicine to psychiatry. Medicine is a very large field, psychiatry is a very narrow field but it focuses on emotion distress. Energy psychology uses only some of the tools of energy medicine, but it laser focuses them on emotional uses.

Christine: That's a great explanation, David. We have a few practitioners on this summit talking about tapping and their variations and it's just this increase in the powerful message that there is a quicker way to heal these past traumas that get stuck in our physical bodies and our limbic system and create these stressful patterns. That there is a more elegant and simpler way to resolve these than years and years of talk therapy.

While that has a purpose, there's a place for that, this seems to be the message that we keep hearing, and what I've also seen in my practice – I don't do this work but have referrals for this – that it's amazing to see the results that people can get with this. And I love your explanation about rewiring the limbic system and the stress response. And do you also feel like these traumas get [inaudible] and maybe you have an explanation with what you

see, with how you see the energy? Do you see that trauma or emotions get stuck in our energy body?

Donna: Trauma can get stuck in ourselves, in any of the energy systems and tapping, it works so beautifully. What I see is you can literally see the pulsing that is happening in the meridians and a traveling up. You know, you just see it happening. Gosh, it is just so important, I think, to be able to have these tools so that you can feel empowered to take care of whatever is going on in you.

David: The thing that really impresses me with your work is that I learned that chromo is stored in the brain, but you see it in the chakras.

Donna: I do. I see it the chakras. I see it everywhere. I see it in organs. It is not just in the brain. The brain is somehow is making sense of things that, believe me, is everywhere in your body. And many times, when I had my practice, I would just bypass the brain all together because people thought they knew what was going on or they wanted to talk about it or whatever. And I just wanted to work with their energy.

Christine: Yeah, it's a faster way of moving energy out. Traditional medicines, like Chinese medicine, has a language for this. Some people might understand this concept, like if you have chronic liver issues, there can be anger or resentment, or chronic kidney issues, you can have a pattern of worry or fear and so that the organ—So do you see that pattern, too, that certain organ systems hold certain emotional energies?

Donna: Oh, yes. Absolutely. And all of us – I think it is about evolution – and all of us have some vulnerable organ in our body because of emotions, because of emotions. For me, my spleen meridian



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was always very weak. A spleen governs how much you do for others versus doing for yourself. And, if you are always taking care of everybody else, you are short-changing yourself and it will show right up in the Spleen Meridian. It is the same with every organ in the body, has the same thing going.

Christine: With patients, we do muscle testing, too, and common point for balancing patients in our practice is spleen sick. That is another way of looking at the Spleen Meridian. David and Donna, you have obviously been doing this work for many decades now and I am sure it's been exciting for you to see the increase in awareness and knowledge that people are having, but I'm sure we still have a long way to go, right, to get the word out here. What are you most excited about when you look at the evolution of energy medicine over the last four decades that you all have seen?

Donna: Oh, I will say mine and then you say yours. I think I love seeing people getting empowered. It's more than just healing yourself. It lifts your self-esteem. It gives you a bigger sense of everything in the universe. It gives you a bigger sense that you are not alone. Whoa! What's making this energy go? It is wonderful. The other thing is – oh, there will be three things I want to say. The second thing is, I love seeing children do it because children find out very quickly because they don't put things into categories. Well this my health and this is this and this is...

What they find out is their brains turn on and they can learn better and easier. And energy has a tendency to get all scrambled in the brain. When everybody else is a big adult and you are a little person, things can get confusing. I used to do a lot of volunteer work in school systems. The thought then was that, if a child couldn't learn, they just

weren't smart and this thing where they ought to apply themselves harder or whatever, but usually it was just energy. Straighten out the energy out and it all worked. That's the third thing. The other thing was, I love seeing, and I believe it is the wave of the future, is that energy medicine will go more hand in hand with Western medicine and it is coming together more and more and more, and I love that. I love seeing that happen.

David: Dr. Christiane Northrup wrote the forward to Donna's book, *Energy Medicine for Women*, and she talked about the way she sees medicine developing in the future and she sees a complementarity between energy medicine and conventional medicine, but she sees that energy medicine will be the first line of intervention. That you do the less, which is a principle of conventional medicine, that you do the least invasive intervention first that's likely to work.

So, she really articulated it beautifully how that could be the future of medicine. You start by working with the energies that are involved with the symptom and that will often take care of the symptom. If it doesn't, then you might turn to medication or you might turn to surgery. But, even if you turn to medication or surgery, they have certain medication is an energy intervention, it is just hard for the chemistry to try and get the right energies to go. But, if you work with the energies along with the medication, you can reduce side effects. As well as reducing side effects, you can increase the effectiveness of the medication. You get a harmony with the medication and the body.

Also, if there needs to be surgery, you can prepare the body for surgery by getting all the meridians in balance, all the chakras in balance, all the different energy systems into good harmony. Then, when



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the surgery occurs, the body is ready for it. And then, after the surgery, after this invasion into your body, to balance all the systems again, people are going to get the results they wanted from the surgery more readily and also heal faster. So, you really have a wonderful dance between.

And I think where we have seen change in 42 years is that there are more and more lights within Western medicine. There are more and more doctors are recognizing that this is not just a passing fad. This is something that really goes to the essence of what they're working with, with the bodies that they are healing. Working not only with the physical intervention but working with the energy interventions enhances their work. It is not a different than – of course, there are probably issues of any marriage. Even though there are amazing cases, we don't say come to us to cure your cancer or to cure your MS because there are so many factors involved that it is a way of -- it is an intervention that is coming from a different angle from the conventional methods and they often have surprising impacts.

Donna: I just wanted to say, one of the things that I've seen different doctors-- There was a time when doctors didn't take classes from us, but they are now. It's changing. Almost all doctors that I've really encountered who work with energy have really understood that autoimmune illness are not aligned out very well with Western medicine because they don't know how to really work with autoimmune illnesses. But energy medicine does because it is just the issue of your energy has turned against yourself. It is not doing it to harm you. It has just gotten confused and how to unconfuse your energies, that is the best healing for autoimmune illnesses is energy medicine.

David: One of the things that occurred before we went on the road on our six-city tour that we're still on. Ashland, Oregon, is a very special city and one of the characteristics is that it has so many natural healers that medical community has had to learn to work with them because your patient, as a physician, is also seeing Donna for an energy healer and they are not going to stop.

So, the medical community in Ashland, at least the parts that we were familiar with were very comparable working with this dual perspective. And, often, when a physician was stuck, they would refer to Donna and Donna was working with a lot of the doctors in this beautiful harmony. She was, I think three times, was invited into a surgery so that she could help with monitoring the anesthetic because, in a case where somebody was allergic, it was very delicate.

So, she could do muscle testing and just work with it and also just help the energy be optimized for healing for a really successful surgery. We have seen it in action. It is not widespread yet, but we feel like this is where things are going. Knowing you, Christine, and what you are doing is just really encouraging to us to see that integrative approach.

Christine: Well, thank you so much. I think that that's just such a beautiful vision that we all need to work to. Starting with energy medicine always and first and that will, whatever your intervention is, that will only allow it to work better and amplify the results. And you might not even need to go to that next level which is of course what we want to prevent. So, I think that is so beautiful vision and we are working on it. And that is a big goal of this summit, is to really get this information out that we are beyond our biochemistry and that there is this whole other aspect of our body's ability to



heal and we can work with those, too. And, when we work with that together, that's where the most healing can happen. It is a really exciting time and you guys have been ahead of the curve for a while now. And I'm sure you have seen a lifetime of beautiful stories with your work. And I know you still teach, and I know that there are so many ways to learn from you all. If people are really interested in exploring your work or learning from you. How can they learn more about the techniques and trainings that you do?

David: They will get a lot from going to learnenergymedicine.com, learnenergymedicine.com. We have all kinds of resources, Facebook group, newsletters, a lot of information there. We are kind of moving over to a new website which is edenmethod.com, [E-D-E-N method.com](http://E-D-E-N-method.com), but we are mostly still on the old one. Eventually we will be on the [edenmethod](http://edenmethod.com) site. We have got, I think, 500 pages that we are slowly migrating over. So, either of those two are good places to begin.

Christine: This is where you can also find a practitioner or a teacher in your area. It has every piece of information I think you can find about or at least where to go and get it, you will find it on our website. It is very good.

David: We have online programs that are a really great way to begin. We have a list of all of the workshops that we're teaching that people can attend. So, there's a lot of resource there.

Donna: I know one. For the last 3 or 4 years, we have, along with my two daughters, done something called the *Wednesday Energy Minute*. If you want to learn just AN energy technique once a week that you can really absorb, just follow it on –

David: Facebook.

Donna: -- Facebook or you can also go to YouTube and get the 100s that we have done. We have done them all over the world, the *Wednesday Energy Minute*.

Christine: I love that. I love that. You have so much information to share with the world. We'll put the links to your websites with this recording and I am so grateful that you all are part of the summit and for the work you all have put out in the world. We're really grateful so thank you.

Donna: Thank you, it was great.



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